

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

Whole No. 1229.

WEDNESDAY, SEPTEMBER 3, 1851.

Vol. XLV. No. 5.

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UNIVERSITY OF NEW YORK. MEDICAL DEPARTMENT.—The Faculty of the New York University, in announcing their ensuing Course of Lectures, take great pleasure in stating that their large classes have rendered it necessary for them to erect a new Medical Edifice. They have purchased a most eligible and spacious site in Fourteenth st., near Union Square, on the centre of which their new Edifice is now in the course of erection, and will be completed by the tenth of September next. The Building will consist of three large lecture-rooms, each capable of containing from 300 to 600 persons, museums, dissecting-rooms, &c. The anatomical lecture-room will be lighted by a dome forty feet in height. In a word, no expense nor labor has been spared to make this Edifice all that could be desired by the friends of the institution.

The Faculty are most happy to state that they have been enabled to appoint to the Chair of Surgery and Practice, made vacant as heretofore announced, two gentlemen of pre-eminent character, and they sincerely congratulate the friends of the University throughout the country on the increased strength which these appointments will give to the Institution. Dr. ALFRED C. POST, the Professor of Surgery, is an able and experienced Surgeon, and his connection with the New York Hospital will afford additional facilities to the students of the University. Dr. Post is extensively engaged in surgical practice in the city of New York, and will bring to his Chair a ripe experience. Dr. MEREDITH CLYMER, the Professor of the Institutes and Practice, is a gentleman well known to the profession, both by his writings and by connection with the Virginia and Philadelphia Medical Schools. He has also been for many years Professor of Clinical Medicine in the Philadelphia Hospital.

SESSION 1851-52.

The Lectures will commence on Monday, the 20th of October, and be continued under the following arrangements until the last day of February.

GRANVILLE SHARP PATTISON, M.D., Professor of General Descriptive and Surgical Anatomy.

MARTIN PAYNE, M.D., Prof. of Materia Medica and Therapeutics.

GUNNING S. BEDFORD, M.D., Prof. of Midwifery and the Diseases of Women and Children.

JOHN W. DRAPER, M.D., Prof. of Chemistry and Physiology.

ALFRED C. POST, M.D., Prof. of the Principles and Operations of Surgery, with Surgical and Pathological Anatomy.

MEREDITH CLYMER, M.D., Prof. of the Institutes and Practice of Medicine.

WILLIAM DARLING, M.D., Demonstrator of Anatomy.

GEORGE A. PETERS, A.M. M.D., Prosector to the Prof. of Surgery.

In order to afford ample opportunity to their pupils of studying disease practically, the Faculty have organized three weekly Cliniques, held in the College building.

1. A Surgical Clinique every Saturday, by Professor Post.

2. A Medical Clinique every Wednesday, by Professor Clymer.

3. An Obstetric Clinique every Monday, by Professor Bedford. The most interesting cases of women and children will be presented to the Class and fully lectured on by the Professor. The Class will also have an abundant supply of midwifery cases, to be attended at the houses of the patients. For these Cliniques no extra charge will be made.

In addition to these means of studying disease, New York Hospital, the Eye and Ear Infirmary, the various Dispensaries and Infirmarys, are all accessible to the students. Clinical instruction is given every day, at the New York Hospital, of which Professor Bedford is in the charge. A dissection-room and an ample supply of the *material* furnished. Students who pursue dissection, will be examined daily on anatomy, by the Demonstrator.

Fees for the full Course of Lectures, \$100. Matriculation fee, \$5. Practical Anatomy, \$5. Graduation fee, \$20. The Spring Commencement will take place early in March, and the Summer Commencement early in July.

Good Board can be obtained for \$3 per week.

Students on arriving in the city, will please call at the College building in Fourteenth street, near Union Square, and inquire for Mr. Polman, the Janitor, who will conduct them to boarding houses near the College.

JOHN W. DRAPER, M.D.,

President of the Medical Faculty.

P. S.—Students who arrive in the city before the 1st of October, will please call at the former College building, 639 Broadway, where they will find a person ready to conduct them to the new Edifice.

New York, June 22, 1851.

Je25—copN1

DENTAL AND SURGICAL INSTRUMENTS.—D. WALTER & CO., successors to N. Hunt, manufacture and have for sale all kinds of Surgical and Dental Instruments and Implements.

Old Instruments ground, polished and repaired, at the shortest notice.

Orders will be attended to with promptness.

May 22—17 136 Washington street, up stairs.

CUCUMBER OINTMENT.—Prepared and sold by PHILBRICK & TRAPTON.

TOBACCO OINTMENT, COMPOUND.—Prepared and sold by PHILBRICK & TRAPTON, Chemists, 100 Washington st., Boston. Nov. 22.

MEDICAL JOURNAL ADVERTISING SHEET.

MASSACHUSETTS MEDICAL COLLEGE.—The Medical Lectures of Harvard University will commence at the Massachusetts Medical College in Boston, on the first Wednesday in November, and continue four months.

Obstetrics and Medical Jurisprudence, by WALTER CHANNING, M.D.

Materia Medica and Clinical Medicine, by JACOB BIGELOW, M.D.

Theory and Practice of Medicine, by JOHN WARE, M.D.

Pathological Anatomy, by JOHN B. S. JACKSON, M.D.

Anatomy and Physiology, by OLIVER W. HOLMES, M.D.

Principles and Operations of Surgery, by HENRY J. BIGELOW, M.D.

Chemistry, by J. P. COOKE, A. M.

Clinical Lectures are delivered at the Massachusetts General Hospital three times a week, by the professors of Clinical Medicine and of Surgery. Surgical operations are very numerous, performed weekly in the presence of the class in the operating theatre. The safe and effectual practice of etherization, a discovery first made in Boston, and matured and established in the Massachusetts General Hospital, is practically taught in this school.

Practical Anatomy is amply provided for by the most illustrious professors of the Boston Medical School, one of the largest and richest in the United States, and has a fund of \$5,000 for its increase. The Eye and Ear Infirmary and other charities are open to students.

The professors of Pathological Anatomy, of Surgery, and of Chemistry, are now pursuing their medical inquiries in Europe, but are expected to return in season to be present at the opening of the coming course.

Fees for the whole course, \$80. Matriculation, \$2. Dissecting Ticket, \$2. Graduation, \$3. Hospital and Library gratuitous.

June 11.—epit.

CHIRRETTA—A new Anti-periodic, just received by PHILBRICK, CARPENTER & CO., 160 Washington street, Boston. Aug 6

ELIXIR OF OPIUM—Made from the formula of the Philadelphia Journal of Pharmacy, and is intended to be a substitute for the "popular" medicine called McMurran's Elixir. This is a preparation of Opium without Narcotine, and the strength is the same as Tinct. Opii. Manufactured by PHILBRICK, CARPENTER & CO.

Successors to PHILBRICK & TRAFTON, Chemists. July 23.

SARATOGA POWDERS—or Rochelle, Seidlitz, and Soda Powders, one package equal to six boxes of the above—price 15 cents. These will be found a great convenience to travellers, persons residing in the country, invalids, and to all deprived of a sofa-cushion. Cut up and sold by J. RUSSELL, STALDING, 23 Tremont Row, opposite Boston Museum. April 30—12

PURE COD LIVER OIL, carefully prepared only from fresh and healthy livers, by Joseph Burnett, Apothecary, No. 33 Tremont Row, Boston. Dr. J. C. B. Williams, an eminent English physician, after prescribing it in 400 cases of consumption (in 23 of which he preserved full notes), states in the London Journal of Medicine—"As the result of experience, confirmed by a rational consideration of its mode of action, the pure fresh oil from the liver of the cod is more beneficial in the treatment of pulmonary consumption, than any other agent, medicinal, dietetic, or regimenial, that has yet been employed." June 18—12

MATICO—A fresh supply just received and for sale by JOSEPH BURNETT, No. 33 Tremont Row. Mich 17—12

DENTAL REMOVAL—Dr. J. H. SMILIE, having removed to No. 51-2 Tremont Row, is now prepared to perform every operation in Dentistry required for the health and preservation of the Teeth, and trusts that his former success will insure a continuance of public patronage. Opp. the head of Brattle st. Boston. July 16—3m

VACCINE VIRUS—Physicians in any section of the United States may procure ten quills charged with *Pure Vaccine Virus* by return of mail, on addressing the Editor of the Boston Medical and Surgical Journal, enclosing one dollar, *post paid*, without which no letter will be taken from the office. Feb. 8.

NEW YORK MEDICAL COLLEGE.—The next annual Course of Lectures in the New York Medical College, will commence on Monday, the 30th of October, 1851, and continue five months.

OBSTETRICIAN, M.D., President of the Faculty, and Prof. of the Theory and Practice of Medicine.

JOHN H. WHITTAKER, M.D., Prof. of General, Descriptive and Surgical Anatomy.

EDWIN HAMILTON DAVIS, M.D., Prof. of Materia Medica and Therapeutics.

FORDYCE BARKER, M.D., Prof. of Midwifery and Diseases of Women and Children.

R. OGDEN DOREMUS, M.D., Prof. of Chemistry.

JOHN MURRAY CARNOCHEAN, M.D., Prof. of the Principles and Operations of Surgery with Surgical Pathology.

EDMUND R. PEARLER, M.D., Prof. of Physiology, Pathology, and Microscopy.

JOHN GALLAGHER, M.D., Demonstrator of Anatomy.

A. M. EISENLOORD, M.D., and **WM. B. THOMPSON, M.D.**, Proectors to the Professors of Surgery.

A preliminary Course of Lectures will commence on Monday the 30th of October, and continue until the commencement of the Regular Course. On the Pathology and Diagnosis of the Diseases of the reproductive Organs of Females, by H. F. Barker, M.D. On Toxicological Chemistry, by R. O. Doremus, M.D. On the Surgical Operations of the Eye, by J. M. Carnochan, M.D. On Dental Pathology and Dental Surgery, by T. C. Allen, M.D.

The Preliminary Course will be free to all medical students and medical men. The dissecting rooms will be opened at the beginning of this Course.

The advantages which New York offers for Clinical Study far surpass those of any other city. The Students of this College can have access to the New York Hospital, Bellevue Hospital, and Emigrants' Hospital, as well as to the Eye and Ear Infirmary, and the various Dispensaries of the city. A Surgical and a Medical, and an Obstetrical Clinique will be held weekly by the Professors of these departments. Obstetrical cases and subjects for dissection are abundantly furnished for the students.

Fees—Matriculation, \$2. Demonstrator's Ticket, \$2. The full course, \$100. For the final examination, \$30.

The candidate for graduation must be of the age of 21 years. He must have studied medicine under a respectable practitioner for three years. He must have attended two full Courses of Lectures, of which one must have been in this College, and he must present to the Faculty a thesis, in his own hand-writing, on some Medical or Surgical subject.

By the charter of the Institution a Graduate of this School can practise his profession in any part of the State without being subject to the annoyance of examinations from Medical Societies.

R. OGDEN DOREMUS, Dean of the Faculty.

New York Medical College, East Thirteenth st., near Broadway. a13—epn1

NEW UTERINE SUPPORTER—Invented by Dr. ROBINSON, and far superior to his Improved Pessary—not liable to break nor corrode—small, worn with ease, can be applied by the patient, and answering all purposes, *where mechanical support is needed*. It has been examined, approved and used by many physicians. All are invited to call and examine.

Sold only by Dr. J. H. ROBINSON, wholesale and retail, at No. 4 Montgomery Place, Boston. Jan. 22—eplyr

NITRATE OF SILVER, in crystals, manufactured and sold by PHILBRICK & TRAFTON, Chemists and Druggists, 160 Washington st., Boston. Feb. 12.

PROTEIN—Sold by PHILBRICK & TRAFTON. Oct. 16.

SATURATED TINCTURE OF ENGLISH SQUONITE ROOT. Sold by PHILBRICK & TRAFTON. Nov. 31.

MEDICAL JOURNAL ADVERTISING SHEET.

UNIVERSITY OF PENNSYLVANIA. **MEDICAL DEPARTMENT.** **EIGHTY-SIXTH SESSION,** 1851-52.—The Lectures will commence on Monday, October the 6th, and terminate about the end of March ensuing.

Theory and Practice of Medicine, by **GEORGE B. WOOD, M.D.**

Anatomy, **WILLIAM E. HORNER, M.D.** **Materia Medica and Pharmacy,** **JOSEPH CARSON, M.D.**

Chemistry, **JAMES B. ROGERS, M.D.** **Surgery,** **WILLIAM GIBSON, M.D.**

Obstetrics and the Diseases of Women and Children, **HUGH L. HODGE, M.D.**

Institutes of Medicine, **SAMUEL JACKSON, M.D.** **Clinical Instruction at the Pennsylvania Hospital,** by **GEORGE B. WOOD, M.D.** and by **GEORGE W. NORRIS, M.D.**

Demonstrative Instruction in Medicine and in Surgery, by the Professors of the **MEDICAL FACULTY.** **Anatomy,** **J. W. GERHARD, M.D.** and **HENRY H. SMITH, M.D.**

Practical Anatomy, by **JOHN NEILL, M.D.** **Demonstrator.**

Amount of Fees for Lectures in the University, \$105. **Matriculation fee (paid once only),** \$5. **Hospital fee,** \$10. **Practical Anatomy,** \$10. **Graduating fee,** \$30.

Dean of the Medical Faculty.

306 Chestnut st., above Thirteenth, op. U. S. Mint, Philadelphia. June 15, 1851. Jct 25—epn1

MEDICAL COLLEGE OF OHIO. **Session of 1851-52.**—The **Thirty-Second Annual Session** of this institution will open on the 15th of October next, and close on the last of February, under the following arrangements.

H. W. BAXLEY, M.D., Professor of Anatomy. **JOHN LOCKE, M.D.**, Prof. of Chemistry and Pharmacy.

L. H. LAWSON, M.D., Prof. of Physiology and Pathology. **T. G. EDWARDS, M.D.**, Prof. of Materia Medica and Therapeutics, and Medical Jurisprudence.

E. D. MUSSEY, M.D., Prof. of Surgery.

LANDON C. RIVES, M.D., Prof. of Obstetrics and the Diseases of Women and Children.

JOHN BELL, M.D., Prof. of Practical and Theory of Medicine.

J. H. DAVIS, M.D., Demonstrator of Anatomy.

The following branches will be included in the course:—**Anatomy, Chemistry, Pharmacy, Physiology, Pathology, Materia Medica, Therapeutics, Medical Jurisprudence, Medical Botany, Surgery, Obstetrics, Diseases of Females, Diseases of Children, Practical Medicine, and Clinical Medicine and Surgery.**

The **Dissecting Rooms** will be opened for classes on the 1st of October.

Clinical Lectures on Medicine and Surgery will be delivered at the Commercial Hospital three times a week.

The Medical College of Ohio affords the most ample opportunity for the prosecution of Practical Anatomy and Clinical Instructions in Medicine and Surgery.

Preliminary Lectures—A course of Lectures will be delivered by the Faculty (free of charge), commencing on the 1st of October; also, Clinical Lectures at the Commercial Hospital.

Fees.—For a full course of Lectures, \$105. Matriculation and Library Ticket, \$5. Dissecting Ticket, \$10. Graduation Fee, \$25. Hospital Ticket, \$5.

Board (including the expenses of room, fuel and light) can be obtained at from \$2 to \$3 per week.

A new College Edifice will be erected during the ensuing summer.

Further information may be obtained by addressing the **Dean.**

J. M. LAWSON, M.D., *Dean of the Faculty.*
South side of 6th st., between Walnut and Vine, Cincinnati, July, 1851.

jy 25-40

EXTRACT OF HOP and Fluid Ext. of Pink and **Elephantopus, Valerian, Alex. Senna, Rhubarb and** **Buchu.** Manufactured and sold by **PHILBRICK & TRAFTON, Physicians' Druggists.** Nov. 6.

ENGLISH HERBS.—Leaves of **Hyssopium, Bell-** **iiodina, Conium, Digitalis and Aconite,** for sale by **PHILBRICK & TRAFTON.** Nov. 13.

PREPARATIONS OF SILVER.—Nitrate in Crystals, Oxide, Iodide and Chloride, manufactured and for sale at 160 Washington street, Boston, by **PHILBRICK & TRAFTON,** Chemists.

UNIVERSITY OF THE STATE OF MISSOURI.—The **Twelfth Session** of this University, will open on the 16th October next.

Medical Department.

JOSEPH N. McDOWELL, M.D., Professor of the Principles and Practice of Surgery, and of Clinical Surgery.

RICHARD F. BARRET, M.D., Prof. of Physiology and of Medical Medicine.

JAMES B. JOHNSON, M.D., Prof. of Clinical Medicine and Pathological Anatomy.

ASHER HOPKIN, M.D., Prof. of Chemistry and Medical Jurisprudence.

G. GRATE MORGAN, M.D., Prof. of Obstetrics and the Diseases of Women and Children.

JOSEPH N. McDOWELL, M.D., Prof. of General, Descriptive and Surgical Anatomy.

JOHN S. MOORE, M.D., Prof. of the Principles and Practice of Medicine.

JOHN HOPKIN, M.D., Adjunct Prof. of Surgery and Instructor of Anatomy.

L. T. FIR, M.D., Adjunct Prof. of Anatomy, and Professor.

PETER MASON, Curator.

HERRY WILLIAMS, Junior.

Aggregate cost of Tickets, \$105. Graduation fee, \$25. Matriculation fee, \$5. Good boarding from \$25 to \$3 per week.

For further information address the **Dean of the Faculty**, or call upon him at his office, No. 64 Fourth street, under the **Planter's House.**

JOHN R. MOORE, M.D., *Dean.*

St. Louis, May 10, 1851.

may 21-11.

COLLEGE OF PHYSICIANS AND SURGEONS OF THE UNIVERSITY OF THE STATE OF NEW YORK. The **Forty-fifth Session** of the College will be commenced on Monday, 15th October, 1851, and continued till March 11th, 1852 (commencement day).

ALEXANDER H. STEVENS, M.D., LL.D., President of the College and Emeritus Professor of Clinical Surgery.

VALENTINE MOTT, M.D., LL.D., Emeritus Professor of Operative Surgery and Surgical Anatomy.

JOSEPH N. SMITH, M.D., Professor of the Theory and Practice of Medicine and Clinical Medicine.

JOHN TORREY, M.D., LL.D., Professor of Botany and Chemistry.

ROBERT WATTS, M.D., Professor of Anatomy.

WILLIAM PARKER M.D., Professor of the Principles and Practice of Surgery.

CHANDLER E. GILMAN, M.D., Professor of Obstetrics and the Diseases of Women and Children.

ALONZO CLARK, M.D., Professor of Physiology and Pathology (including Microscopy).

ELIJAH BARTLETT, M.D., Lecturer on Materia Medica and Medical Jurisprudence.

CHARLES E. ISAACS, M.D., Demonstrator of Anatomy.

Fees.—Matriculation fee, \$5; fees for the full course of Lectures, \$105; Demonstrator's Ticket, \$5; Graduation fee, \$25; Board, average \$3 per week.

Clinical Instruction is given at the New York Hospital daily, by the Medical Officers (Prof. Smith being one of them), fee \$6 per annum; at the Bellevue Hospital twice a week, without fee (Prof. Parker and Clark belonging to the Medical Staff); at the Eye Infirmary, without fee; and upwards of 1000 patients are annually exhibited to the class in the College Clinique. Obstetrical cases and subjects for dissection are abundantly furnished through the respective departments.

The annual commencement is held at the close of the session; there is also a semi-annual Examination on the second Tuesday of September.

The prerequisites for Graduation are—21 years of age, three years of study, including two full courses of Lectures, the last of which must have been attended in this College, and the presentation of a Thesis on some subject connected with medical science.

In addition to the regular Course, and not interfering with it, a Course of Lectures will be commenced on Monday, 29th September, and continued until the 13th October. This course will be free.

R. WATTS, M.D., *Col. of Phys. & Surgs.* **67 Crosby St. N. Y.** *Sec'y to the Faculty.* **Jy 15—swish—owin.**

PHILBRICK, CARPENTER & CO., *late Philbrick & Trafton.*

PHYSICIANS' DRUGGISTS AND CHEMISTS, *Members of the Massachusetts Medical Society.* **160 Washington street, Boston.**

R. E. PHILBRICK, M.D.

L. ATWOOD, Chemist.

Jy 15

MEDICAL JOURNAL ADVERTISING SHEET.

TREMONT STREET MEDICAL SCHOOL.—
In BOSTON, OVER 33 TREMONT Row. The annual course of instruction in the Medical School commences this year on the first day of September.

This School was instituted in Boston, in 1838, for the purpose of giving to private pupils a thorough course of instruction, by lectures and examinations, throughout the year. Two hundred pupils, including a large part of the recent academic graduates of Harvard University, who have devoted themselves to the study of medicine, and many others from all sections of the country, have received their professional education, or some portion of it, at this institution. By an act of the Legislature a charter has been granted to the Medical School, which is thus enabled to call itself of all the privileges with which the laws of the State have conferred or may hereafter confer upon incorporated medical institutions.

Exercises in the different branches are given daily or oftener, from the close of the University lectures in March, until their commencement in November, with the exception of the month of August, during which most of the usual labors of the School are suspended. During the session of the University Medical School, examinations are held three times weekly on the subjects of the lectures.

The following gentlemen are instructors in this School, during the present year, in the several departments of medical science, forming a complete and thorough course.

JACOB BIGELOW, M.D.
D. HUMPHREY STORES, M.D.
J. B. S. JACKSON, M.D.
OLIVER W. HOLMES, M.D.
HENRY J. BIGELOW, M.D.
SAMUEL CABOT, M.D.
SAMUEL KNEELAND, M.D.

Practical Anatomy is taught under the immediate direction of the Teacher of Anatomy and Physiology, assisted by the Demonstrator of the Medical School of the University. Ample means of pursuing this important branch of study, and for the practice of the more important surgical operations, are provided without additional expense to the student.

CLINICAL INSTRUCTION.

This essential branch of a medical education is made an object of special attention. There will be clinical visits at the Massachusetts General Hospital, in the Medical Department, by Drs. Bigelow, Jackson and Storer, with Lectures at stated intervals; and demonstrations to the practical study of Anatomy and Percussion, for which ample opportunities occur in the wards of the Hospital.

Clinical instruction in Surgery will be given at the same institution by Dr. Henry J. Bigelow. Ample opportunities are afforded for experience in Obstetric practice.

PUBLIC INSTITUTIONS.

In addition to the medical and surgical practice and operations of the Massachusetts General Hospital, the Students will have admission to the Eye and Ear Infirmary, through the politeness of the Surgeons of that institution; and also to the institution for the treatment of Diseases of the Skin, by permission of Dr. Durkee.

MEANS OF ILLUSTRATION.

The large collections of healthy and morbid specimens in the Warren Anatomical Museum, and the Cabinet of the Boston Society for Medical Improvement, will be made available for the purposes of instruction under the direction of Dr. Jackson, the Curator of both these collections.

LIBRARY.

During the whole Summer term, the Students of the Tremont Street Medical School will have free access to, and the privilege of taking Books from the Library of the Massachusetts Medical College, now consisting of about 1500 volumes, and rapidly increasing by a large annual appropriation, devoted to the purchase of Books most useful and acceptable to the Student.

* Application may be made to Dr. BIGELOW, Summer street, Boston. A new Catalogue of the past and present Members of the School, with other details, may be had gratis, by applying, post-paid, to Mr. BURNETT'S APOTHECARY, 33 Tremont Row, at W. D. TICKNOR'S Bookstore, or at Mr. JACKSON'S Office.

The Room of the School, at 33 Tremont Row, over Mr. Burnett's Apothecary store, is open to Students from 8 A. M. to 10 P. M., furnished with Plates, Preparations, Articles of the *Materia Medica*, &c.

TERMS.

For the Summer Term (from March 1st to November 1st), \$30. For the Winter Term (from November 1st to March 1st), \$10. For a Year, \$100.

Boston, August, 1851.

Aug 27-1f

A N adjourned meeting of the Massachusetts Medical Society will be held in Boston on Thursday, October 2d, at 10 o'clock, A. M., in the Masonic Temple, Tremont street.

CHAR. E. WARE, Rec. Sec'y.

Aug. 27-1m

A STATED Meeting of the Counsellors of the Massachusetts Medical Society will be held in Boston, on Wednesday, Oct. 1st, at 10 o'clock, A. M., in the Masonic Temple, Tremont street.

CHAR. E. WARE, Rec. Sec'y.

Aug. 27-1m

UNIVERSITY OF NASHVILLE.—Medical Department. The First Annual Course of Lectures in this Department will commence on the first Monday of November next, and continue till the first of the ensuing March.

PAUL F. EYK, M.D., Professor of Surgical Anatomy and Clinical Surgery.

JOHN M. WATSON, M.D., Prof. of Obstetrics and the Diseases of Women and Children.

W. H. BUCHANAN, M.D., Prof. of Surgery.

A. H. BOWLING, M.D., Prof. of the Institutes and Practice of Medicine.

C. E. WILKINSON, M.D., Prof. of *Materia Medica* and Clinical Medicine.

ROSEAY M. PORTER, M.D., Prof. of Anatomy and Physiology.

J. BERRIEN LINDSLEY, M.D., Prof. of Chemistry and Pharmacy.

WILLIAM T. BRIGGS, M.D., Demonstrator of Anatomy.

The Anatomical rooms will be open for students, on the first Monday of October.

Fee of each Professor, \$15; Matriculation ticket, \$1; Dissecting ticket, \$1; Graduation fee, \$25.

Classes will be obtained in the city, at from \$2 to \$3 50 per week. Further information may be obtained by addressing the Dean.

J. B. LINDSLEY, M.D.,
Dean of the Faculty.

Aug. 27-1018

NOTICE TO PHYSICIANS AND THE PUBLIC GENERALLY.—The subscriber, aware of the adulterations practised in preparing and powdering Drugs and Medicines for the market, and the difficulty experienced in distinguishing the pure, has arranged to have most of these articles powdered in his establishment. Samples of drugs in their original state will be kept for comparison, and he recommends Dr. A. H. Hayes, State Assayer, to analyse at any time such preparations as may appear of doubtful genuineness, before offering them for sale, thereby insuring to physicians pure drugs and medicines.

WM. BROWN.

481 Washington, corner of Elliot street.

N. B.—With the above arrangement all can be supplied with pure and undiluted medicines. Physicians of Boston and vicinity are invited to call and examine the above arrangement, and see samples of pure drugs and medicines. No one allowed to put up prescriptions except those of long experience and perfect masters of their profession.

The sale of all Fancy Goods and Confectionery is discontinued on the Sabbath. Prescriptions and family medicines sold as usual on that day.

Sept. 4.

SURGICAL INSTRUMENTS.—PHILBRICK & TRAFTON have for sale Pocket Cases of Instruments, Pocket Cases of Tools for Drying Medicines, Cupping Cans, Dipping Cans, Breast Pumps in cases, do, Gum Elastic, Nurse Bottles, Nipple Shells, Breast Pipes; Catheters, male and female, single and double, of silver and gum elastic; Bougies for urethra and rectum; Syringes, self and common; Maw's self-injecting Instruments; 1 cases; Hutchinson's Aperitive Fountain; Speculums, vaginal and rectal; 15 Syringes, for administering solids by the rectum; Stomach Pumps; Stomach Tubes, to be used with a common syringe; Glass Inhalers, for administering medicated vapors; Ramrod Inhaling Tubes; Teeth Forceps, Scissors, Urm's Supporters, Shoulder Braces and Busk, short Handgrips of every description.

Nov. 13.

CANTHARIDAL COLLODION.—A new Epi-dermic Remedy, and substitute for the ordinary preparations of Cantharidin. It is a species, convenient and powerful; can be applied to any portion of the body, and remain entirely unaffected by the movements of the patient. It requires the employment of neither leather or linen as in the use of the ordinary vesicating agents. Manufactured and for sale by

PHILBRICK & TRAFTON, *Druggists*.

Jan. 22-1f

160 Washington St.

THE
BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. XLV.

WEDNESDAY, SEPTEMBER 3, 1851.

No. 5.

STRANGULATED HERNIA—IMPORTANCE OF OPERATING EARLY—
WITH CASES.

BY ALFRED HITCHCOCK, M.D., FITCHBURG, MASS.

[Communicated for the Boston Medical and Surgical Journal.]

SINCE the publication of the great work of Astley Cooper, it ought to be needless to write or print anything more in favor of *operating early* in cases of strangulated hernia. The discovery and application of anesthetic agents since then, would also seem to add force and potency, as well as feasibility to the plan and valuable precepts of that distinguished surgeon on this point. Nevertheless, clear and emphatic as those precepts are, every surgeon of considerable observation can bear testimony to the fact that *delay* is generally the sole cause of fatal results in cases of strangulation requiring the operation—and whoever has borne the responsibility of occasionally “cutting for hernia” in a country practice, has quite as often regretted the *lengthened delay* that has preceded his use of the knife. In attempts at taxis, moderate, cautious, but continued pressure should be made on the tumor for at least half an hour—as authors assert that reduction has been effected after a continuous pressure of more than twenty minutes. A fitful, spasmodic or violent pressure is not only useless, but dangerous. The longer the strangulation has existed, the more danger from violent pressure by taxis. Simple intestinal hernia is usually more easily reduced by taxis than omental, or both combined. If the diagnosis is plain that the tumor is *omental*, of course more force and longer time may be employed with safety in manual attempts at reduction. Venesection to faintness becomes a valuable adjvant, by the general languor it induces, and relaxation of strictured parts, and also by preventing or subduing local inflammation. The small thready pulse accompanying strangulation will become more full by free depletion. The warm bath, the tobacco enema, ice or frigorific mixtures to the tumor, are each to be successively tried, in order, if possible, to avert the alternative of dividing the stricture with the knife. The tobacco is a very potent and not always perfectly safe remedy. Dr. Mussey used to say, in his lectures, that the usual tobacco enema was more hazardous to the patient than the operation of dividing the stricture with the knife. Lobelia has been used as a substitute for tobacco—and in a

few cases where I have observed its effects, the two articles have seemed to be almost identical in their operation when introduced into the rectum. It is quite doubtful whether anything would be gained by substituting lobelia for tobacco. Full doses of opium are often quite valuable in aid of taxis; and in three cases in my practice this has proved successful when all the other usual means had failed. Anesthesia unquestionably becomes a very valuable adjuvant in the reduction of hernia by taxis, as well as a saving from pain if the operation becomes necessary. The antispasmodic and relaxing influence of full anesthesia has seemed, in several instances under my observation, to do more good in aid of taxis than all the other means and appliances that usually take precedence of the knife. Other means, however, should rapidly precede it; and then, when anesthesia is fairly induced, if reduction cannot be effected by taxis, the surgeon should be ready and prompt to complete the work by operation; always remembering that every moment's delay diminishes its safety and success.

Sir Astley Cooper speaks of "irreparable injury often inflicted by the rough gripe of the surgeon, and injudicious handling of the hernia by the succession of violent attempts by taxis." The dread to use the knife, and avoidance of the responsibility of an important operation, often dispossess the timid practitioner of the requisite degree of care and caution in manipulating the delicate and important viscera contained in the hernial protrusion. That distinguished surgeon, Pott, says "that the operation for strangulated hernia is not dangerous in itself"—and this opinion has been well sustained by the experience of all surgeons since his time. I think Samuel Cooper has somewhere stated that the statistics of this operation have shown only one recovery in every three cases. The frequent deaths following this operation, the best authorities assert (and every operator will confirm the statement), is owing generally to the fact of its being performed *too late*—the parts are already gangrenous, or inflammation has extended to the viscera of the abdominal cavity, which a division of the stricture of course fails to arrest. Such unfortunate and fatal delays cannot be too much lamented, and not unfrequently are deserving of reprobation.

In persons of middle life, the necessity for early and immediate operation is much more urgent than with the very young or the aged, for the obvious reason that the relative tonicity of fibre is greater in the former. If the hernia is *small, recent* and *intestinal*, the danger from delay becomes more imminent. Unfortunately, there is no sure criterion, no invariable succession of symptoms, which will point, like the hands of a dial, to the last possible moment when the patient can escape with life by yielding to the knife; and if such a point of time were cognizable, no surgeon would be morally justified in waiting its arrival. Everything must depend on the knowledge, tact, and self-reliance of the surgeon. There is no period in the symptoms (unless the patient is moribund) which is so late as to forbid the operation—as many patients recover even after gangrene has occurred. A large amount of *moral* power, added to *professional* influence, is often necessary to obtain early the patient's consent to the operation. It is believed that but few patients

of ordinary sense and intelligence would hesitate in submitting to the operation if their case was fairly and precisely stated. The great danger from delay—the facility and rapidity with which the different and successive measures should be practised to accomplish reduction, ought strongly to impress the mind of the surgeon; and especially the unpleasant responsibility that must attach to him, if postponement arises from his vacillation or timidity. It cannot be doubted that cases illustrating the fatal danger of postponing the operation, would oftener be published were they not generally a bad commentary on the diagnosis or energy and self-reliance of the attending surgeon.

From my note-book I copy the following cases illustrating some of the preceding remarks:—

CASE I.—Mrs. J. Lawrence, of Ashby, aged 64—June 22d, 1841, was taken with abdominal pain, vomiting and moderate diarrhoea; in fact, the symptoms closely resembled cholera morbus. After spending two hours with the patient, it was found that the usual treatment for such cases failed to afford relief. On inquiry the patient was found to have no knowledge of hernia or the existence of tumor of any kind. A day passed in unsuccessful attempts to palliate the symptoms, when my suspicions of the existence of strangulation became so strong that a manual examination was made, and a small tumor, the size of a walnut, was found in the left groin, precisely in the position of femoral hernia. The tumor was very hard and slightly tender, which of course was increased by attempts at taxis, having *assumed* that it was hernia. Two physicians were soon with me in consultation, and no trio were ever in more uncertainty in diagnosis, or doubt as to the expediency of operating. Cathartics had passed freely through the bowels—the vomiting had somewhat diminished in frequency, and yet was sufficiently severe, with other symptoms, to proclaim the existence, if not of strangulated, at least incarcerated and inflamed omentum. It was finally concluded that the tumor must be omental and adherent to the sac, and that inflammation had extended from the tumor to the abdominal viscera and produced all the symptoms, and, consequently, that the operation would be useless. Treatment was pursued based on this theory. The symptoms varied but little till July 8th, when the tumor suddenly became of a green color and crepitous under the finger—the pulse sank, and the patient died. The next day we made a post-mortem examination, and held another *consultation* on the tumor; the result of which, revealed a femoral hernia containing a knuckle of the ileum with about two thirds of its diameter embraced in and adherent to the sac, leaving a part of its calibre pervious and admitting the passage of the intestinal contents. Inflammation and fatal gangrene, of course, existed. I can never rid myself of a compunctionous impression that this patient might have been saved by an early operation.

CASE II.—Eleazer Rice, of Ashby, st. 54—May 13, 1844, seized at evening with strangulation of an old femoral hernia. I failed to reduce it by taxis. May 14th, made several unsuccessful attempts during the day, having other professional assistance. On the morning of May 15th, forty hours after strangulation occurred, I operated in the usual

manner, and returned the intestine, but retained the sac, which was already partly gangrenous and in a few days sloughed away. This patient was not healthy—had twelve to twenty ounces of serum in the abdominal cavity, which escaped when the stricture was divided; and yet, after a protracted confinement, he made a good recovery, with a radical cure of the hernia. In this case the operation would unquestionably have been less hazardous had it been performed earlier. Femoral hernia in the male, requiring the operation, is said by authors to be exceedingly rare.

CASE III.—August 25, 1846, I was called by my friend Dr. White, of Westminster, to operate on Mr. D. Lang, æt. 25, for a large inguinal hernia that had been strangulated two days. On opening the sac, the contents were found to consist of intestine and omentum; the former was returned, but the latter was so much discolored and gangrenous it was deemed prudent to remove some twelve or fifteen square inches of it with the knife. The vessels were secured by ligature, and the excised surface of omentum for a while was kept pendant at the internal abdominal ring. Very profuse and troublesome suppuration took place, involving the spermatic cord and scrotum; and yet he perfectly recovered, with a radical cure of his immense hernia. It is reasonable to infer that this man would have recovered, without dangerous sloughing and suppuration, had the operation been performed within twelve hours after strangulation occurred.

CASE IV.—Nov. 23, 1849. Mr. Samuel Brooks, æt. 60, of Townsend—strangulated inguinal hernia; had been attended very judiciously for twenty hours by Dr. Gerry. He had early reduced the tumor, and yet the symptoms of strangulation increased in violence and danger. The apex of a hard, oval-shaped tumor, could be distinctly felt at the upper ring, floating in the abdominal cavity. The case seemed clearly one in which a dangerous strangulation existed within the sac; and accordingly, the patient being etherized, I laid open the inguinal canal, seized and drew down the tumor, and on opening the sac found a knuckle of intestine of a chocolate color firmly strictured at its neck. This being divided, no further symptoms of strangulation occurred; and he quickly recovered, with a radical cure. It cannot be doubted that a few hours' delay in this case would have been fatal.

CASE V.—January 18th, 1849, I was called at midnight (thermometer 20° below zero) to visit James W. Bliss, Esq., æt. 55, of New Ipswich, N. H., a patient of Dr. Cochrane. The operation for femoral hernia was anticipated, it having been strangulated fourteen hours, and the symptoms being unusually rapid and violent. The usual means had been very judiciously adopted to accomplish reduction by taxis, but without success, indicating that the operation would be inevitable. It was agreed that the patient should be kept in a warm bath at the highest temperature endurable, and at same time partial anesthesia to be induced by chloroform. This state was continued for more than an hour, when, under the cautious and persevering manipulations of my friend, the attending physician, the hernia was unexpectedly reduced, and the patient escaped both the peril of strangulation and the scalpel.

CASE VI.—Sept. 11th, 1850. Mrs. C_____, æt. 45, of New Ipswich, N. H., after suffering thirty-six hours with strangulated femoral hernia, was operated upon in a most skilful manner by her attending physician, Dr. Cochrane, in the presence of several medical gentlemen. For two hours an unsuccessful effort was made to induce anesthesia. This, together with a most unfortunate delay in first calling medical aid, prolonged to a hopeless moment the use of the knife. The strangulated bowel, already in a state of gangrene, sloughed the third day after the operation, and the patient died from irritation and exhaustion, the 28th of Sept. An early operation in this case could scarcely have admitted a doubt of perfect success. Unfortunately in this, as in many other cases in private practice, the surgeon cannot freely exercise his own will, in the decision of his judgment, in reference to the *time* for using the knife.

CASE VII.—The following case occurred in a distant town in New Hampshire, and is kindly furnished by a valued medical friend, a near relative of the patient.

Mrs. C_____, æt. 60, in December, 1846, was suddenly seized with violent symptoms of strangulated femoral hernia. After a few hours of preparation and manipulation, the tumor was reduced *en masse*—and for two or three hours succeeding its reduction the patient was quite easy, and vomiting and hiccups ceased; the patient, however, continuing to express the conviction that the strictured bowel was not relieved. The symptoms of strangulation soon returned, accompanied by those of acute peritonitis. These were of the most violent and distressing character, and proved fatal in twelve hours from the last attack. The post-mortem examination revealed a loop of intestine within, and adherent to the neck of the hernial sac. Perforation of the strictured bowel had taken place, and a large quantity of liquid faeces had escaped into the abdominal cavity. The usual evidences of rapid and fatal peritonitis were also present. The remembrance of this case can scarcely fail to bring with it a conviction that a seasonable operation, *Deo volente*, might have saved the life of the patient.

CASE VIII.—Mr. Levi Pollard, æt. 74, Ashburnham. Right inguinal hernia—small and reducible—fifteen years' standing—wore a truss.

June 24th, 1851, at 10, A. M., after some extra muscular effort he found the hernia protruded more than usual, attended with very severe pain and vomiting; says he felt more pain than ever before in the tumor, although it had been frequently protruded and required the horizontal posture for its reduction. This time he reduced the tumor himself in his usual manner, but said that the pain and sense of stricture were in no degree relieved by the reduction of the tumor. Vomiting and pain continued, and his family physician, Dr. Cutler, was sent for. The doctor found the hernia entirely reduced; and the eye or finger could discover *no appearance of tumor*. Quite naturally the case was considered as colic, with engorgement of the bowels, and was treated with an emetic of ipecac. and repeated doses of active purgatives and large enemas. There was considerable abdominal distension and tenderness, for the relief of which, extensive vesication had been induced by cantharides. The enemas emptied the lower bowels, but no cathartic opera-

tion from the medicine; nor was there ever a passage from the upper bowels till the occurrence of artificial anus just before the patient's death. The stomach rejected everything the patient swallowed. There was a constant *dull pain* and sense of stricture across the abdomen—at intervals of half an hour to two hours a severe attack of spasmodic pain and violent stricture, succeeded by vomiting of stercoreous matter. There was great thirst; the pulse ranged from 70 to 90, regular and never hard; the skin about the natural temperature, except during the paroxysms of pain, when the extremities would become slightly livid and the whole surface bedewed with a cold sweat. Mind perfectly clear—and he frequently expressed his conviction that the hernia was the continued cause of all his suffering. The attending physician and friends had several times suggested to him the *possibility* of an operation, even though no tumor could be felt. He absolutely refused any such overture, and adjured one of his sons to defend him from the surgeon's knife. In this state of suffering, literally praying for death, and well nigh dying, he lingered till July 3d, the eleventh day from the occurrence of strangulation. At this time two of his sons arrived from a distance, and one of them (a very intelligent clergyman, whose gentlemanly bearing and judicious management on this trying occasion received much commendation) succeeded in persuading him to allow a full consultation on his case in reference to the expediency of an operation even at so late a day. Through the judicious and kind influence of the clerical son he cheerfully consented to any measures deemed best in the judgment of his medical advisers. Under these circumstances I saw him (July 3d) with his attending physician and two other medical gentlemen, and several medical students. His condition was now as follows:—Pulse 70, regular, soft and very easily compressed. Mind rational, but rather dull, and inclined to doze in the intervals of severe pain and vomiting. No hiccups that morning, although they had occurred more or less every day for a week past. Skin rather cool, and at knees and ankles slightly livid in spots, although this appearance would quickly disappear by friction. Mouth dry, with brown tongue, and moderate thirst for cold drinks. Vomiting, as often as once an hour, of whatever was swallowed, and always succeeded by more or less dark-yellow stercoreous matter. Urine passed freely, of tolerable good character and quantity. The abdomen, which had been extensively blistered, was moderately distended, and to the eye, or on passing the hand over its surface, exhibited *no appearance of tumor*. I then examined him in different positions, so as to relax the abdominal muscles, and favor the introduction of the finger along the track of the spermatic cord to the upper ring. In this way, after considerable effort and change of the patient's posture a tumor was distinctly felt in the abdominal cavity, with its apex presenting at the upper ring. The tumor was very hard and exquisitely sensitive. Its existence and its diagnosis as strangulated bowel was immediately recognized by all the medical gentlemen present. We lost no time in deciding to give the patient the only possible chance by an operation. The patient being etherized, I commenced by an incision through the integuments five inches in length, directly over the

course of the inguinal canal. On reaching the aponeurosis of the external oblique muscle, and a grooved director passed under, it was laid open from the external to the internal ring. There was now a more distinct feeling of resistance to the tumor. The other coverings of the cord were quickly divided, which brought into view a dark-colored mass at the internal ring, which proved to be the hernial sac, nearly the circumference and twice the length of a hen's egg. By the kind and judicious assistance of Drs. French and Miller, the tumor was drawn down, and after cautiously opening the sac at its upper part a grooved director was inserted, and with a bistoury opened its whole length. Two or three drachms of grumous serum escaped, exposing a loop of intestine about three and a half inches in length. The intestine, for about one third of its length, was firmly attached to the lowest part or bottom of the sac. Lymph was effused in great abundance, forming the bond of adhesion, which, with the intestine itself, was of the darkest mahogany color, and very obviously in a state of incipient, if not actual, gangrene. The attachment was carefully separated with the blade and handle of the scalpel. The stricture, which was very high and in the *neck of the hernial sac*, was divided with a probe-pointed bistoury passed flatwise upon the finger. But very little hemorrhage attended the operation. The intestine was returned into the abdomen, and two sutures secured the lower part of the incision, the upper part being left open, with the diseased intestine presenting at the internal ring. While recovering from anaesthesia, the patient vomited several times and had a return of the hiccups. He took ammonia and subsequently morphine, and an enema of warm water. Two hours after the operation, while vomiting and tossing about the bed, the gangrened intestine suddenly sloughed away, and its contents, including a part of the enema, came gushing out through the artificial anus. The patient died early on the morning of the 4th, twelve hours after the operation.

The most interesting features of this case would seem to be the concealed nature of the hernia and consequent obscurity in the diagnosis; the almost chronic and yet unyielding symptoms of intestinal strangulation; the good character of the pulse, and other general symptoms co-existing with a fatally strictured bowel; and the necessary inference that an *early operation* might have been successful.

NOTES TAKEN FROM HEARING MED. LECTURES IN PHILADELPHIA.

BY JOSEPH COMSTOCK, M.D., LEBANON, CONN.

DR. RUSH.

On Rheumatism.—When there is immobility and feeble pulse, vol. alkali may be used. Sometimes there is only lameness, without pain. Bleeding is here the remedy. In scorbutic rheumatism, the remedies are bloodletting if the pulse be full, and stimulants if the pulse be typhoid.

Rheumatalgia is lameness in all the limbs. It is sometimes an ill-cured rheumatism. Tincture of pokeberries, he has known used with great advantage. Sulphur may be taken every day for months. Lisbon

diet-drink; or, what is better, decoction of the root of sassafras. Externally, volatile liniment, spts. turpentine, tinct. cantharides mixed with sweet oil. Plasters of mustard and vinegar. Tar, wax, and garlick, of each equal parts. Sulphur in a bag worn on the part affected. Quick lime two parts, oatmeal one part. Blisters do no good, but harm, by their evacuations. He does not advise bloodletting in rheumatalgia. When everything else fails, the patient must live upon milk without bread or any other diet! Acids are to be avoided.

On Tic Douloureux.—Dr. R. said, that this sometimes ceases for days, weeks, and even months, and then recurs again. It is excited by moving or speaking. When in the leg, it has been excited by so slight a cause as a piece of paper falling on the part. It sometimes affects gouty habits, and has been relieved by the interposition of gout. He mentioned a physician, whose name I did not retain, who had eight cases of it in a short time, and not another case for 27 years; from which he suspected something in the air. Dr. Rush says, "I have often spoke of those diseases being most violent which affect only one system, which is the case with tic douloureux."

Cure.—Here let medicine put on sackcloth! Every thing has failed, even cutting the nerve that goes to the part. Dr. —— knew it cured by a magnet applied to the seat of pain. Issues are sometimes successful. In one case it ceased whilst the person was playing whist. Formidable diseases are sometimes cured by simple remedies; as children are said to be cured of colic, by rubbing their bellies. Hence, as powerful means have failed, he recommends only such as are mild and gentle.

N. B.—Dr. Rush does not recommend bleeding in this painful affection, which I believe in most or all others he does.

Cephalic State of Fever. Phrenitis.—Dr. Portalis, says Dr. Rush, denies that the dura mater is the seat of pain. But Dr. Rush observes, that different parts are affected with different stimuli, and that the dura mater may be pained by distension. Phrenitis may be caused by concussion of the brain, also by blows and contusion. Worms, which produce in those instances no irritation in the stomach or bowels, sometimes produce phrenitis.

Phrenitis Notha, is when there is no inflammation, but distension only. Dissections have shown water in the brain, or the parts bony. Sometimes, however, nothing morbid is discovered in the brain; the disease, in that case, transcending inflammation. Persons who talk or walk in their sleep never remember their dreams. Delirium is relieved by the entrance of a friend or physician, phrenitis is not.

Remedies.—1st, Bleeding. A case was mentioned in which a man was bled twelve ounces every day for 20 days! The hair should be shaved off. The ankles and wrists should be blistered. Laudanum should be given to moderate the disease, but not to produce sleep. A salivation should always be resorted to in chronic cases. If it arise from evacuations suppressed, they should be restored. If from repelled eruptions, these should be brought back.

Mania, is phrenitis without fever. Sometimes it is symptomatic, and affects persons in lieu of intermittent fever, lasting as long as the paroxysm, and ceasing like it with a sweat. The people of the Commune

Vallois had epidemic madness. Persons were mentioned who went mad by seeing the *Andromeda* of Euripides acted. Dr. Rush, however, thought this only an exciting cause, and that intermittent fever or some other disease laid its foundation.

DR. COXE, Prof. of Chemistry, said that nitrous acid made to act upon oil of amber, and afterwards dissolved, resembles musk, and is used in pertussis.

Oxy-muriate of potash sets sugar and gum arabic on fire. The latter burns with a most beautiful flame. Phosphorus was exhibited, burning in oxy-muriatic gas, to prove that oxygen was unnecessary to combustion. It was, however, done in an open vessel.

DR. CHAPMAN, Prof. of Materia Medica, Feb. 1, 1816.

On Mercury.—Mr. Abernethy revived mercurial fumigation, which excites salivation sooner than any other method. Mr. Pearson, of the Lock Hospital, disapproves of the practice. An instrument was exhibited for fumigating the fauces with cinnabar. Red oxyde of mercury, in doses of one grain, was used by John Hunter. R. White precipitate, grs. xv.; sal. nitre, 3 ss.; sulphur, 3 j.; hog's lard, 3 ij. This formula has been used in this city for half a century, with great success in the cure of all eruptions. If corrosive sublimate is given internally, commence with 1-8th or 1-6th of a grain, up to 1-4th. The quantity given in a day must not exceed *one grain*. It does not excite salivation in many instances. It is the basis of quack remedies for the cure of syphilis, which they deny to contain any mercury. The article is remarkably easy to disguise. Even when mixed with molasses, it is said by Dr. Kuhn to be impossible to detect by the usual chemical tests!

DR. COXE, Prof. of Chemistry.

Muriatic Acid is obtained in the form of gas at first. It has not been proved to contain oxygen. Water impregnated with this gas is the muriatic acid of the shops. After obtaining muriatic acid from sea salt by means of sulphuric acid, the residuum is sulphate of soda. Muriatic acid may be considered as having hydrogen for its basis. Its being so similar to oxygen itself, is the reason it cannot be decomposed. This is Mr. Davy's opinion.

Oxygenated Muriatic Acid is totally unfit for respiration, and produced a rapid consumption in a professor who had the temerity to breathe it. In Dr. Coxe, who inhaled it, it produced pneumonic inflammation, closure of the glottis, and an illness with great expectoration. He was obliged to lose thirty ounces of blood. One eighth common salt, three parts manganese, with vitriolic acid poured on, is one method of obtaining this gas. Charcoal, finely powdered, as well as some of the metals, are inflamed by it. The same smell, Dr. C. mentions, arises from bathing in the sea, as from the smell of this gas. And he throws out the conjecture that this may arise from the decomposition of sea-water by the body. Corrosive sublimate is a salt without any water. This was said by the Professor. [But I inquire, from whence, then, has it its transparency?] The base of muriatic acid is unknown, it never having been decomposed. Sodium and oxy-muriatic acid combined, are supposed to form common salt.

CARCINOMATOUS DISEASE OF THE KNEE-JOINT.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—I herewith communicate for the Journal the details of an interesting case of disease of the knee-joint—in amputation for which I was called to assist Drs. Gran and Higginson, of Brattleboro', Vt. The accompanying account was drawn up by Dr. Higginson, after minute investigation of the case, in which we were very materially aided by a valuable microscope belonging to Dr. Gran.

Your obedient servant,

GEO. B. LORING.

Boston, Aug. 10, 1851.

Joseph Czrenner, aged 28, a Magyar by birth, held the rank of major in the Hungarian army of insurrection. In January, 1849, while on horseback, he was struck on the inner side of the left knee by a piece of shell which had exploded near him. Though the blow was severe, he was not forced to leave his saddle, nor did he suffer from it for any length of time. While bathing, in July, of the same year, the left foot swelled and became very painful, but both pain and swelling went off in the evening of the same day. He was, however, unwell afterwards, and resorted to the mineral baths of Mehadia, in Hungary, with advantage. In the latter part of August, he, with the corps to which he belonged, retired into Turkey, where he remained fourteen weeks, restrained in his motions by the surveillance of the Turkish government, encamped most of the time on damp ground, or else in prison, with bad and insufficient food. At about the end of November he escaped into Hungary, to Pesth, his native town, but was soon arrested by the Austrian authorities and again imprisoned. Again he escaped, through the connivance of a medical attendant, being provided with a passport made out for another, the personal description in which answered for him. He now made his way through Germany to Hamburg, where he arrived on the 16th of February, 1850. He had no lameness while on this journey. But he fell on the pavement in Hamburg a few days after he arrived, striking the left knee, which had also been struck with violence in the month of January against the edge of a chair. Pain in the knee came on directly, followed by swelling, from neither of which has he been free since. For this trouble he came under medical care, and was attended by three physicians for six weeks without material benefit. He remained in Hamburg till the month of August, when, on the advance of Austrian troops into Germany, it was thought advisable that he, with other Hungarian refugees, should leave the country. He accordingly sailed for New York, where he arrived on the 16th September last, accompanied by his wife, to whom he was married in Hamburg. His disease, mean while, was advancing. While on the voyage he was able to walk, touching the left foot on the deck. But some weeks before arriving he had a fall, striking the left knee again, which swelled more rapidly afterwards, so that on reaching New York he was obliged to use a crutch.

On the 23d January, 1851, he entered the City Hospital, New York, where he came under the care of Dr. Buck. Here, he says, amputation was advised. Some friends, however, urged his trying the water

cure, and he accordingly came to the Brattleboro' water-cure establishment near the first of April. The disease still steadily increased, and his suffering also, so that from early in June he was confined to his bed.

On the 28th of July, he was removed from the water-cure to a neighboring house, where he came under the care of Dr. Gran, late of Germany, at whose request I saw him on the 31st. He had the dark sallow complexion said to belong to his race, with black eyes, hair and beard. He was thin and pale, with an expression of suffering on his face as he lay still; yet when cheerfully spoken to, his countenance was lighted up with an animated smile. The pulse was 84, of some force and volume. He lay upon his back, with the left leg slightly bent at the knee and raised upon a pillow. The swelling began very abruptly at about one fifth of the length of the thigh above the knee. It reached its maximum at a little above the patella, the circumference here being 19 2-3 inches. This size it held down to the insertion of the ligament of the patella into the tibia, whence it tapered off to the ankle. The circumference of the sound knee was 12 1-2 inches. The integuments were tense and red over the whole knee and leg, the blue lines of the veins being strongly marked over the latter. On the inner and anterior part of the knee, just above the line of the patella, was a spot of about two inches in diameter, of a dark livid hue, elevated above the surrounding surface, where, to the touch, there was yielding, as of a soft pulpy substance beneath the skin, without distinct fluctuation, while the rest of the knee's surface was firm, and in some points hard to the touch, as if bone were underneath. In the centre of this soft prominence an incision had been made about ten days before, at the water-cure house. Blood only had escaped, and that in some quantity. Granulations of a not unhealthy look were now apparent at the place of incision. These bled at the slightest touch. The swelling below the knee had come on chiefly within the last month or six weeks; and the livid spot, above described, made its appearance, he says, still later. The pain had become much harder of late, being most acute at a point near the livid elevation, and running thence down the leg to the ankle, where was another point of intense pain at times. The pain, though unequal in severity, had been without intermission, keeping him awake many whole nights while at the water-cure. Since his removal he had taken one third of a grain of sulphate of morphine nightly, and had slept pretty well. His appetite had been slight, his food consisting chiefly of fruit and ices. Within a few days he had taken some broth. He showed courage and a hopeful spirit, with great power of endurance.

The appearance of the parts, with the dark elevation from which, on incision, only blood escaped, while the granulations there still continued to bleed, taken with the history of the disease, suggested the idea of *fungus haematoxides*. Without making a decided diagnosis, I agreed with Dr. Gran in thinking that the present condition of the patient, viewed in connection with the past, pointed to amputation as the only means of saving his life.

On Saturday, August 2d, the patient having mean while had two good nights' sleep, the operation was performed by Dr. Gran, in presence of

Dr. Arms, of this place ; Dr. Loring, late of the Chelsea Marine Hospital ; Dr. Bemis, of Dummerston, and myself. Chloroform was administered by Dr. Farwell, dentist, and the patient was soon under its influence. The integuments were divided about two inches above the commencement of the swelling, and the bone at about its middle, an ample covering for its extremity being thus obtained. Five arteries were tied, and the after hemorrhage was slight, though during the cutting it was very large, principally venous. The pulse ceased at the wrist as soon almost as the operation began, and for a few moments the patient looked as if he would not go through it ; but with ammonia to the nostrils, and, as soon as he could swallow, brandy, he revived, vomiting previously very freely.* In the course of an hour he appeared pretty well. He took brandy and water occasionally through the day, with some broth ; had a good night's sleep, without opiate ; appeared better the next day, and has gone on improving up to this time, no opiate being needed, the bowels being moved daily, and the appetite becoming good. The pulse was 100 the afternoon after the operation ; to-day (4th inst.) 88. He complained of pain in the amputated knee and ankle for two days after the operation ; since then, it has been very slight most of the time. An incision was made into the amputated limb along the fore and inner side of the knee, and through the puncture which had been made in the dark-colored soft elevation, down to the insertion of the ligament of the patella. The muscular substance thus divided had for the most part a color and consistence not unsound. At the edge of the dark spot before described, the knife passed into a mass of the consistence of brain, of a mottled color between that of muscle and adipose matter. The diameter of this mass just below the integuments was a little over two inches, and its limits here were well defined towards the surface by a thin membranous envelope, which, however, soon disappeared as the substance approached the bone, where it occupied a much larger space. The finger, passed through this medullary mass towards the joint, came in contact with carious bone. The whole joint being laid open, was found completely disorganized. The condyles of the femur were gone, with a portion of the shaft of the bone on the inner side, where also, above the limit of the caries, there was a square inch of the periosteum gone. The spongy portion in the centre of the bone was destroyed farther than the outer layers. Two pieces of cartilage, with bony particles attached to their upper surfaces, lay loose below the femur, evidently the remains of the articulating surfaces of the two condyles. Of the patella, the upper third with its synovial cartilage was almost entire, the caries having gone behind this, leaving an edge of cartilage extending lower than the bone, while for the other two thirds only a thin outer shell remained, preserving the shape of the joint. Of the tibia, that part of its head, which corresponds to the outer condyle, was untouched, as was its semilunar cartilage. On the other portion caries had scooped out of the synovial end a hollow, reaching from the front to the back of the bone, an inch or more in width, and of like

* The depression was, I think, the effect of the chloroform. About two drachms were used on a thin handkerchief spread over the mouth. There was of course large waste.

depth, leaving only about a line's breadth of synovial surface on the inside of the joint. There was no trace of the semilunar cartilage here. The ligaments had all disappeared, and the region of the joint was filled with the mottled pulpy mass mixed with bony particles. The end of the upper and outer process of the fibula was for a quarter of an inch affected with caries. On cutting away the gastrocnemii and soleus, a large deposit of the diseased product was found between these muscles and the bone, confined in no distinct sac, though its outline was well marked; apparently communicating with the mass in the joint. There was no caries of the bone here, and the muscles retained their natural color and texture.

The disease here presented was medullary sarcoma. While its ravages throughout the joint showed that it had been at work there for a long time, the external manifestation of it, in the dark semi-fluctuating mass pointing above the knee, had occurred, as the patient said, within a month or little over. As to the precise point of its origin, each might conjecture for himself. That it had long been incurable, there could be no doubt. There was of course no resource but in amputation. Whether the constitution be so far affected that the disease will re-appear, time alone can show. The patient's present condition and appearance are as encouraging as possible.* He says that his constitution was naturally good. Both parents were, at his last accounts, living and in health.

Dr. Gran is inclined to regard the blow from the shell in January, 1849, as the exciting cause of the disease. The patient's long apparent freedom from any local ill consequence makes me doubt it.

At Dr. Gran's request, and in consequence of his inexperience in writing in English, I have drawn up the foregoing account. But for the reason given, a better narrative would have come from him.

Brattleboro', Vt., Aug. 4th, 1851.

FRANCIS J. HIGGINSON.

MEDICINAL INHALATIONS.

[Communicated for the Boston Medical and Surgical Journal.]

DEAR SIR,—I read, some time ago, an article in the Boston Medical and Surgical Journal, on the inhalation of solid medicines and vapors, in the treatment of lung diseases, by Wm. M. Cornell, M.D., of Boston. The author gives a good history of this practice, and writes a good article. But he speaks of the practice as his own suggestion, or at least as though he was the first to revive it, or bring it, in an improved form, before the profession. As this impression is somewhat general, as far as the practice is known, I write for the purpose of claiming priority of all others, writing upon this subject in detail, and so far as yet appears in print, of using it in practice. Three years ago, I used myself, and prescribed for others, inhalation of several different medicines in the form of dry powder. I have been successful in curing bronchitis and severe

* The plasters were removed and the wound re-dressed on the 9th inst. It looked very well.

cases of bleeding from the lungs, in this way. In 1849, April 17th, I read a paper on this subject before the Medical Society of Rochester; and in June, 1849, I published an article on the subject in the Buffalo Medical Journal, and in July another. I have been in the habit of using medicines in this way with good results since.

While in Europe, last winter, I learned this practice had not been adopted. M. Pierry, in Paris, pronounced it dangerous, and refused to try it at my suggestion. I have since learned that a London physician has written on the subject, and claims to be the originator of the practice. I may be in error by many years, as to the priority of my article; but if I am, I cheerfully yield the credit to whomsoever it belongs. As yet, however, I shall claim it, until better claims are established.

Deeming it the duty of every one who can contribute a new idea or make available an old one, I have given my views to the profession, to be corrected or adopted as they think proper. I should also be happy to communicate some cases to you for publication in your valuable Journal, if you would honor me with a small space.* Will you please give this letter an insertion, and oblige Yours respectfully,

Rochester, N. Y., Aug. 27th, 1851.

M. M. RODGERS, M.D.

MONUMENT TO DR. JENNER.

To the Editor of the Boston Medical and Surgical Journal.

SIR.—In your Journal of the 27th a notice is taken of the proposed monument to Dr. Jenner, and a wish is suggested that it might be erected in one of our own cities. Some consideration may perhaps change this wish. There is not, indeed, any objection to a monument in this city, if its inhabitants, or those of the State, would furnish adequate funds. But the same reasons would lead to the erection of a like monument in every city in the United States; and, indeed, in every city in the world. And after all, the purpose would not be answered.

Dr. Jenner conferred a blessing on all countries and on all generations, from the time of his discovery. It seems proper and desirable that the people of all civilized countries should unite in the erection of a suitable and permanent monument in honor of him. And in respect to the place for its erection, there cannot be any hesitation. The place should surely be the metropolis of Dr. Jenner's own country. Let us not envy the country of our forefathers for the distinction it acquires in this respect, but bless it for all the good we have derived from it; and in the spirit of gratitude, not of rivalry, let us try to contribute our share for the advancement of the great cause of humanity. A. B.

Boston, August 28, 1851.

* Brief reports of the cases referred to by Dr. R. will be acceptable. We are inclined to think that neither of the gentlemen can claim to be an *originator* of the plan of treatment in question. On page 202, Vol. II., of the Boston Medical Intelligence, 1824, may be found an account of Dr. P. P. Myddleton's mode of practising inhalation. Dr. M. lectured on the subject, that year, in Boston, and on his return to Europe left with Dr. James Jackson an inhaler, with instructions as to the method he had found best for using it. Various powders were recommended.—ED.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, SEPTEMBER 3, 1851.

Births, Deaths and Marriages in Massachusetts.—In this Commonwealth, a certain class of statistics are assuming a reliable character. The eighth report to the Legislature, relating to the registry and returns of marriages, births and deaths, from May 1, 1848, to January 1, 1850, is a document of figures, which but very few men have the qualifications to construct, or the patience diligently to read and sift out the errors. Dr. Josiah Curtis, of Boston, under the direction of the Secretary of State, has systematized the town returns on this subject, and out of this mass of materials he has produced a book of 130 octavo pages, that will compare favorably with any similar report in this or other countries. Of the importance of this registration, in after times, when these United States have become old, and land-titles, the inheritance of property, and relationships, may be more essential than at the present moment, as evidence, no doubts can be entertained. It is gratifying, therefore, to perceive that effort is constantly making to improve these reports. Dr. Curtis has introduced new matter. After working through the tables, there is something to read; and it is that which Dr. C. has added, which is entitled to the reader's special thanks.

Twenty months are embraced in the report, during which there were registered in the State, 38,313 births, 10,951 marriages, and 30,595 deaths. Within the five last years, the foreign population of Boston has increased 70.20 per cent., while the native population during the same period has decreased 2.27 per cent. Of the 63,466 foreigners in Boston, 62,923 are from Ireland; 2,666 from Germany, and 7,877 from other countries. We further learn from this publication, that there are in Boston 12,143 children of natives, and 12,132 of foreign parentage. There are 6,644 more females than males in the city.

Within the twenty months, marriages were contracted by persons from 13 years of age to 91. Several females were married at 13. The youngest male was 16. A widow of 18 married a second husband—and one of 59 married a fifth husband. One man of 36, and another of 45, married a fourth time. Calvin Kilborn, of Princeton, 91, married Mrs. Susan Saunders, 70. Among females in Massachusetts, says Dr. Curtis, the chances, at the age of 20, that this interesting event will ever occur, are about 1 to 4; that is—when a female arrives at 20, and is unmarried, one quarter of the probabilities she will be married are gone! If she passes to 25, unmarried, nearly three quarters of her probabilities are lost. If she continue single up to 30, she has passed nine tenths of her chances for ever becoming a wife.

In the last five years and eight months, there were in Massachusetts 14,209 deaths by consumption. Of these, 8453 were females, and 5756 males.

Dr. Curtis next treats of the laws of health, the influence of occupation upon the condition of individuals, and the laws of mortality, which subjects are very ably treated. He does himself much credit in this research, and we are glad that the Secretary has had the magnanimity, in the pre-

face, to apprise the General Court to whom we are all indebted for this able analysis.

University of Michigan.—Such are the energies of the people of the West, that they are not content to copy the institutions of the older sections of the country. In regard to medical instruction, a gentleman may have the benefit of as many courses of lectures as he chooses at the University of Michigan, without money and without price. When another western college promulgated the same generous system, two years since, it was thought that a faculty would not contentedly labor for months in succession without compensation. And besides, the medical departments of other colleges and universities very naturally remonstrated against the adoption of a plan which, it was thought, might seduce away students from all the cardinal points, and consequently do irreparable injury to the able and long-established teachers. Neither the one thing nor the other has taken place. The fact is beginning to be acknowledged that the globe is quite large enough to hold several more schools, without materially crippling or destroying any one already established. Now comes the circular from the new University professors, in Michigan, declaring, in that official notification, that they, too, have no fees. The law provides that the instruction given in this department of the University, as in all others, shall be gratuitous—the professors being paid from the munificent fund provided by the State of Michigan for this purpose. Even a small matriculating ticket does not go into the pockets of the faculty, but must be laid out for the increase of the library, museum, and other means of illustration. The Legislature has sufficiently guarded the honor and reputation of the University, so that second-rate men will rarely get the reins within their grasp. Political favoritism is the only avenue through which an unqualified teacher can seat himself in a chair, but since public sentiment in this blessed country is more potent than military force, there is nothing to apprehend in the long run.

Medical Society of Georgia.—In April the profession of Georgia held their second annual State meeting, which was spirited, and characterized throughout by a high sense of the dignity and importance of their deliberations. Richard D. Arnold, M.D., of Savannah, was elected president. Committees were appointed to report on each of the following subjects, viz., medicine, surgery, obstetrics, hygiene, and indigenous botany. Some stringent rules were proposed to keep the Fellows of the Society from violating their own regulations. After the transaction of some other local business, Dr. Campbell, the President, delivered an address on the "Reciprocal duty of the physician and the public towards each other" It is an able, instructive, and well-timed paper. If it were possible to induce the people generally to read it, many of them would be convinced that they have been grossly ill treating those to whom they are greatly indebted, by encouraging quacks and knaves who assume to be physicians. We are glad to find such writers in our ranks. Notwithstanding the radicalism, empiricism and apostacies of some who might have been corner stones in the edifice, medical science is still well sustained by a body learned and able men.

Medical School of Nashville, Tenn.—This is a new enterprise, well organized, the Faculty embracing seven professors, who carry weight of character with them. The first course of lectures will commence on the first Monday of November, under excellent auspices.

“The Trustees of the University gave to the department a spacious building on College Hill, together with ample grounds, for the term of twenty-two years, which they secured by lease. This is the east wing of the medical department—fronting on Market street 76 feet, and towards the city 45½ feet. It is three stories high, with an attic, affording ample accommodations for dissecting rooms, museum, library, laboratory and professors' rooms. To this a centre building is attached, containing two spacious lecture rooms, 50 feet square, capable each of seating 500 students. The lower room is 19 feet high, and will be occupied by the Professor of Chemistry, and temporarily by the Professors of Theory and Practice and *Materia Medica*. The upper room is 23 feet high, and octagonal in the arrangement of the seats. In this the Professors of Anatomy, Surgery and *Obstetrics* will lecture. The students enter the lecture rooms by two flights of stairs in a hall 14 by 20 feet, fronting College street.

“The west wing, to be added hereafter, will contain the general lecture room, a dispensary, clinic, and janitor's apartments. It will front 76 feet on College street and 45½ towards the city—making the total front towards the city 141 feet.”

Selling Medicines without Prescriptions.—Deplorable accidents are of frequent occurrence all over the United States, growing out of the willingness or custom of apothecaries to sell any medicine that may be called for by persons who are entire strangers to them. The papers relate a case in point. Patrick Fitzsimmons, of Boston, being indisposed, it seems to have been the opinion of the household that an emetic was required. This is the way that a family consultation is sometimes conducted, and, without a knowledge of the disease or the appropriate remedies, something is sent for which must be taken. The physician is not called till the economical family treatment has aggravated all the symptoms, and destroyed the chance for throwing off the malady, as might have been done earlier under judicious advice. A dose of ipecac., in this case, was procured by a woman, but, strange to relate, instead of making Fitzsimmons better, he died. When a physician was called for, in the alarm, he informed the family that it was too late, and nothing could be done to save him. Next, a jury of inquest was summoned, and this is the verdict:—“That Patrick Fitzsimmons came to his death at his residence, from congestion and rupture of the bloodvessels of the lungs, induced from an emetic of ipecac., incautiously administered by the wife, and without consulting a physician.” This was based, it is presumed, on the testimony of Dr. Salter, of Staniford street, a discreet, judicious practitioner. We were much struck with the account of his observations, as reported, that it was the injudicious administration of an emetic without the advice of a physician. We trust that these words will long ring in the ears of apothecaries, till they utterly refuse to put up medicines that are called for and intended to be taken by those who are totally ignorant of their potency. Ten grains of ipecac. is a harmless matter under ordinary circumstances; but there may be a condition of the system that would deter a medical adviser from giving

five. But forty or fifty grains are quite as likely as a less quantity to be dosed out by those who imagine they understand the power of simple medicinal articles. We contend, therefore, that it is better to act on the safe side, for human life is precious. In Boston, the druggists and dispensing apothecaries are in general very excellent, well-informed men, who have a scientific knowledge of their profession. By adopting one new rule, that no medicines shall go out of their establishments to be taken without the advice and cognizance of a physician, they will place the community under further obligations to them.

Medical Coroners.—Over and over again, the propriety of having all coroners medical men, has been urged upon the appointing powers; but the presumption is that they have too much business with the living, to interfere with old established errors that only concern the dead. In England, the functions of a coroner are discharged with ability, by persons of the best medical preparation for understanding both the laws of the land and those governing organized beings. In France, too, and over the continent generally, to put any other than a physician into that office, would be considered absolutely absurd, and an insult to the people. But how is it in our country, the boasted seat of intelligence? Hardly a coroner among us belongs to the medical profession. In the first place, only one, in a town or city, is at all necessary, and he should be centrally located. The city of London has but a single coroner, Mr. Wakley, the surgeon; and Westminster another; and yet they have a population of 2,400,000. In Paris, every dead body found, is removed to the dead house, where the coroner calls an inquest. In Boston, its 130,000 inhabitants have three coroners apportioned to them. A simplification of this unnecessarily complicated system of rival coroners, where only one, a gentleman of scientific attainments, is required, would be not only economical, but satisfactory, as the truth, in regard to the causes of death under circumstances of suspicion, would be more certainly obtained.

Medical Chemistry.—With the return of the lecture season, it should be a subject of earnest solicitude in our medical schools to improve the courses on chemistry. They are essential, yet often the most neglected. The faculties of these institutions seem too generally to undervalue that department. Perhaps this may in some measure be due to the second-rate men who not unfrequently conduct that branch. What has become of all the enthusiasm that used to be felt for medical chemistry? This is not the first occasion that has been sought for rousing the public sentiment in regard to a branch that has been sinking for years, from an elevated position in schools of medicine, till it is almost forgotten. Energetic men should be put into the drowsy chairs, in the hope that we might soon have many to be proud of as chemists, and that there might a revivification and reorganization of the dying out chemical character of the country.

Female Medical Colleges.—Quite a new phase in the history of medicine, is coming over this democratic country. Females are ambitious to dabble in medicine, as in other matters, with a view to reorganizing society. If they would manage the institutions which are ostensibly their

own, no one ought to object ; but, while these pass off under their name, a few of the other sex regulate all the business, pocket all the money, and laugh at their own success. In the mean time, the vanity of the poor dupes is gratified by being told that they are doing a great work, that it is a heavenly calling to be a doctress, and that a revolution will speedily change the social aspect of society, and place them where by nature, grace, and a diploma, they were designed to figure, with a healing balm for every wound.

Sarti's Wax Preparations.—It will be seen, in our advertising columns, that Signor Sarti's celebrated collection of wax figures, which was noticed in this Journal for July 17, 1850, is to be sold in New York, at auction. The following notice, from the New York Medical Gazette, expresses an opinion respecting the collection which we most cheerfully endorse.

“ The lamented death of Signor Sarti has brought his celebrated collection of wax preparations into the market ; and that school which shall be fortunate enough to possess itself of these treasures, would become an object of envy and attraction, for nothing approaching to them in accuracy and perfection has ever before reached this country. For teaching Anatomy, Physiology, and Pathology, they would be invaluable. They are worthy of the great Florentine school, at which they were prepared from nature in the highest style of art.”

Self-acting Blow-pipe.—Mr. James Lewis, 15 Howard street, Boston, an ingenious mechanical dentist, has invented a self-acting blow-pipe that cannot fail of being taken in hand by the chemists and jewellers, even should it not receive the sanction of his own profession. The flame is intensely hot, is carried to a needle-point, or spread into a fan of fire, as may be required, by turning a thumb-screw.

The Census of 1851.—The total population of England, Wales, and Scotland, including the Channel Islands, amounted, on the 31st of March, 1851, to 20,919,531 persons ; of whom 10,184,687 were male, and 10,734,844 were female. The population of London amounted to 2,363,141 persons ; of whom 1,104,256 were males, and 1,258,785 were females. The most remarkable fact in the return is the great proportionate increase in the number of females. In 1841, there were 493,303 more females than males in Great Britain. In 1851, the excess is 550,157. In 1841, the excess of females in London was 124,367. In 1851, it is 154,429.—*London Med. Gaz.*

Privileges of Veterinary Surgeons.—Lord Beaumont has laid on the table of the House of Lords a bill, which has just been printed, to exempt veterinary surgeons, and professors and teachers of veterinary colleges and schools, from serving on juries and in other offices. It seems that, under the letters patent granted to the college, veterinary surgeons are compelled to serve on juries, and to discharge county and parochial duties ; and it is declared that such service is “ highly detrimental to the interests of their profession, and very injurious to the proprietors of horses, cattle, and other domesticated animals.” Therefore it is proposed that they, the professors

of the veterinary art, should be exempted from all such duties by the passing of the present measure.—*Ib.*

Nantucket Knockings.—It has been urged that the new insane hospital for Massachusetts should be located on the island of Nantucket, because its inhabitants seem to be turning lunatics *en masse*. The spiritual knockings have greatly disturbed their usual equanimity. It is an eighth wonder that discreet, close thinking and brave people, who can control the whales in the South Pacific, should be thus duped, or even permit a senseless woman to practise her impositions on the island. A blowing up of the excellent and staunch steamboat that plies between there and New Bedford, was predicted by a spiritual knocker a short time since, and many simpletons dare not now take passage in her. Dr. C. F. Winslow, of that place, has given the deluded dunces a very tolerable drubbing in the *Inquirer* newspaper. He attempts to reason with them, but we fear to no purpose. The delusion is strong; and there are leading ones among them who perform the witchcraft, and make the spirits move according to the cash received.

Accoucheur's Chair.—The following is an extract of a letter from Dr. W. S. Todd, of Angelica, N. Y. It relates to an invention by Dr. N. W. Smith, of North Amherst, Mass., which was more particularly described in the number of this Journal for Oct. 17th, 1849. The letter is dated Angelica, June 25th, 1851.

“DEAR SIR.—I take much pleasure in briefly stating to you my exalted opinion of the merits of the Ladies' Solace, or Obstetrical Chair, which you have invented and offered to the public. I find, Sir, that it is just the thing in all cases of natural, and what may be deemed comfortable, confinement; but still more appropriate in unnatural and protracted deliveries. Its principle, I perceive, is such, that the patient may have any inclination of body or limb, from a horizontal to a perpendicular; and what I deem the most beautiful of all, is the ease and simplicity with which the chair can be operated, and all done while the patient remains quiet upon it. Then, again, its running upon castors, and the facility of folding and packing, render it easy to be carried from place to place. There are many other conveniences about it, of which I have not time to speak.

Respectfully yours,

W. S. TODD.”

Medical Miscellany.—Dr. M. J. Bailey has been re-instated in the office of Drug Inspector for the port of New York.—The late violent tornado in the immediate vicinity of this city, was one of the most remarkable phenomena of the kind on record, and among its disastrous effects were a number of interesting cases in surgery.

To CORRESPONDENTS.—A paper by Dr. Parsons, read before the Rhode Island Med. Society, has been received.

Deaths in Boston—for the week ending Saturday noon, Aug. 30th, 89.—Males, 39—females, 50. **Accidental**, 1—disease of bowels, 11—disease of brain, 1—consumption, 12—convulsions, 2—cholera infantum, 2—canker, 2—dysentery, 13—dy. pepsia, 1—diarrhoea, 4—dropsy of brain, 3—erysipelas, 1—typhoid fever, 2—lung fever, 2—hooping cough, 2—disease of the heart, 2—infantile, 11—marasmus, 1—measles, 1—old age, 2—quinsy, 1—puerperal, 1—teething, 5—tumor, 1—unknown, 2.

Under 5 years, 52—between 5 and 20 years, 7—between 20 and 40 years, 15—between 40 and 60 years, 9—over 60 years, 6. **Americans**, 36; **foreigners** and children of foreigners, 53.

The above includes 6 deaths at the City Institutions.

MEDICAL JOURNAL ADVERTISING SHEET.

BOYLSTON MEDICAL SCHOOL. Incorporated, 1847.—The Fall Session of this School will commence on the first of September, 1851. Its object is to give as complete a course of instruction by recitations, lectures and practical study, as can be given in this country in a period of three years. The plan of the School differs from that of any other School in the country, and with the advantages held out by them, the Instructors hope to send into the profession the brightest talents only.

REGULAR COURSES OR LECTURES

are delivered before the School upon

Diseases of the Eye by *Dr. Williams.*

Diseases of the Ear by *Dr. E. H. Clarke.*

Minor Surgery and Bandaging by *Dr. H. G. Clark.*

Auscultation and Percussion by *Dr. Thayer.*

Further information may be obtained by application to any of the Instructors.

JOHN BACON, Jr., M.D., Instructor in Chemistry and Toxicology, 39 Cresent Place.

CHARLES E. BUCKINGHAM, M.D., *Physician to the House of Industry*, Instructor in Obstetrics and Diseases of Women and Children, 8 Harrison Avenue.

EDWARD H. CLARKE, M.D., Instructor in Materials Medica and Therapeutics, and Aural Surgery, 21 Marlboro street.

W. HENRY THAYER, M.D., Instructor in Pathology and Legal Medicine.

HENRY G. CLARK, M.D., *one of the Surgeons of the Massachusetts General Hospital*, Instructor in Principles and Practice of Surgery, 10 Salem street.

HENRY W. WILLIAMS, M.D., Instructor in Principles and Practice of Medicine, and Ophthalmic Surgery, 10 Essex street.

GEORGE H. GAY, M.D., Instructor in Anatomy, Hollis street, corner of Tremont.

JOHN C. DALY, M.D., *Professor of Physiology at the Leland Medical College*, Instructor in Physiology and Microscopy.

Catalogues containing the plan and objects of the School may be had on application at the bookstores of George W. Briggs, 37 Washington street, under the rooms of the School ; at the bookstore of Ticknor, Reed & Fields, corner of Washington and School streets ; and at Joseph Burnett's, Apothecary, 33 Tremont Row.

WINSLOW LEWIS, President.

Boston, Aug. 20, 1851.

PHILADELPHIA COLLEGE OF MEDICINE, *Fifth Street, a few doors South of Walnut.*—The Tenth Course of Lectures will be commenced on Monday, 13th of October, 1851, at 3 o'clock, P. M. The General Introductory will be given by Prof. F. A. Pickardt, M. D. Degrees will be conferred about the 1st of March, 1852.

HON. JESSE H. BURDEN, M.D., President.

Faculty. JAMES MCCLINTOCK, M.D., Principles and Practice of Surgery.

RUSH VAN DYKE, M.D., Materia Medica and General Therapeutics.

THOMAS D. MITCHELL, M.D., Theory and Practice of Medicine.

JAMES BRYAN, M.D., Institutes of Medicine and Medical Jurisprudence.

ERIA S. GALT, M.D., Medical Chemistry.

JAMES MCCLINTOCK, M.D., General, Special, and Surgical Anatomy.

FREDERICK A. PICKARDT, M.D., Obstetrics and Diseases of Women and Children.

GEORGE HEWSTON, M.D., Demonstrator of Anatomy.

Fee for a full Course, \$84. Matriculation fee, only once paid, \$3 ; Graduation, \$30. Fee for those who have attended two full courses in other Colleges, \$11.00 ; Acting ticket, \$10 ; Perpetual ticket, \$130.

The sum for the respective tickets may be paid to each member of the Faculty, or the whole amount may be paid to the Dean, who will issue a certificate which will entitle the Student to the ticket of each Professor.

The Spring Course for 1852, will be commenced on March 8, 1852. Degrees will be conferred about 10th July, 1852. The fees and arrangements are the same as for the Winter Session.

For further information inquire of

JAMES MCCLINTOCK, M.D., Dean.
Philadelphia, April 8, 1851.

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PHILOSOPHICAL AND CHEMICAL GLASS WARE. (*Bohemian Glass*, *Woolley Bottles*, Retorts, Bell Glasses, Precipitating Jars, Chemical Flasks, Beaker Glasses, Assay Jars) will be in store Jan. 1st, 1851, and will be sold to Physicians and others upon the most favorable terms, by

Nov. 13. **PHILBRICK & TRAFTON.**

PRIZE ESSAY ON CROUP.—The Boston Society for Medical Observation have not yet awarded the Prize, which was offered six months ago for the best practical *Treatise on Croup and its Treatment*. The same Prize is again proposed, and the period of competing for it extended to the first of January next.

All Dissertations must be accompanied by a sealed packet, on which shall be written some device or name, and within shall be enclosed the author's name, and residence. The same device or name is to be written on the Dissertation to which the packet is attached. All unsuccessful dissertations will be deposited with the Secretary of the Boston Society for Medical Observation, from whom they may be obtained with the sealed packet, unopened, if called for within a year after they have been received. All dissertations, moreover, must be *legibly* written, and forwarded, free of expense, by the first of January next, to one of the following gentlemen, who have been requested to act as judges.

JOHN WAKE, M.D.

President Massachusetts Med. Soc.

JOHN JEFFRIES, M.D.

President Suffolk District Med. Soc.

EDW. H. CLARKE, M.D.

Secy's Boston Soc. for Med. Observation.

No prize will be awarded if no dissertation is thought worthy of one.

Aug. 6—luteop

TO MEDICAL STUDENTS AND THE PROFESSION.

DOCTOR ELLIOTT will deliver a course of Practical Lectures with Clinical Demonstrations upon *Ophthalmic Medicine and Surgery*, including *Anatomy, Physiology and Pathology of the Eye*, in November, in the evenings, and the course the minute *Anatomy of the Eye* will be taught by the aid of numerous drawings from nature, prepared for the purpose ; by actual dissections of the organ, and by a superior compound Microscope, manufactured for Dr. Elliott, with special reference to this object.

In the Physiological department, Dr. E. will treat not merely upon the functions of the eye and its appendages, as the visual organ, but will explain minutely the offices of every membrane, tissue, and organ, in this complicated structure, together with their relations to each other, and sympathetic connections with other portions of the body, and the whole will be viewed in their bearings upon the science of Optics, including the powers, uses and modifications of glasses.

In the Pathological department, all the varieties of Ophthalmic disease will be exhibited to the class in their different stages, selected from his numerous patients, who will be present for actual inspection while undergoing treatment. Specimens of colored drawings will serve for comparison and illustration.

The Therapeutical and Surgical portion of the course will be eminently practical, consisting of the rules of diagnosis, the manner of writing prescriptions, the method of preparing the chemical and pharmaceutical remedies demanded in Ophthalmic practice, including the alkaloids, requiring analytical accuracy, together with the application of topical agents, the various manipulations, and all the numerous instrumental and operative proceedings in this department, all of which will be performed in the presence of the class.

Dr. Elliott's extensive experience and success in the treatment of the varieties of Amaurosis, and this without the excessive depolatory means and mercurial abusions which have long been so generally disastrous to the eyes, not less than to the constitutions of the patients, will enable him to promulgate practical views, which he claims to be original and peculiar, but which, for the public benefit, he desires may become the common property of the profession.

The reciprocal relations and sympathies between the structures of the eye and the other parts of the entire body, too often overlooked, will be explained and enforced by pathological evidence, thus demonstrating the indispensable necessity of general and constitutional remedies, together with Hygienic and dietetic treatment in all forms of Ophthalmic disease.

Address, if by letter, to

SAMUEL M. ELLIOTT, M.D.,

49 Broadway, New York.

Aug. 7—luteop For full particulars, with testimonials, see the number of this Journal for July 9, 1851.

GLASS WARE of every description, including German Bottles with accurately ground stoppers, from 1-4 oz. to one gallon. Also, wide and narrow mouthed Phials of white and green glass, of every size and variety, for sale in quantities to suit Physicians, by PHILBRICK & TRAFTON.

Nov. 13.

MEDICAL JOURNAL ADVERTISING SHEET.

JEFFERSON MEDICAL COLLEGE.—Session of 1851-52.—The regular course of Lectures will commence on Monday, the 13th of October, and continue until the first day of March. The ANNUAL COMMENCEMENT for conferring degrees will be held early in March, instead of at the end of the month as formerly.

ROBERT DUNLISON, M.D., Professor of Institutes of Medicine, &c.

ROBERT M. HUSTON, M.D., Prof. of Materie Medicinae and General Therapeutics.

JOSEPH FALCONET, M.D., Prof. of General, Descriptive and Surgical Anatomy.

JOHN K. MITCHELL, M.D., Prof. of Practice of Medicine.

THOMAS D. MUTTER, M.D., Prof. of Institutes and Practice of Surgery.

CHARLES D. MEIS, M.D., Prof. of Obstetrics and Diseases of Women and Children.

FRANKLIN BACHE, M.D., Prof. of Chemistry.

ELIAS L. WALLACE, M.D., Demonstrator of Anatomy.

Every Wednesday and Saturday in the month of October, and during the Courses, Medical and Surgical cases will be investigated, preserved, and kept on view for the class. During the regular sixteen hundred and seventy-nine cases were treated, and two hundred and seventy-three operations performed. Amongst these were many major operations—viz. lithotomy, amputation of the leg, arm, &c., extirpation of the eye and mamma, tracheotomy, extensive plastic operations, resection of the femur for ankylosis, &c. &c.

The Lectures are so arranged as to permit the student to attend the Lectures and Clinical demonstrations at the same time.

On the 1st of October, the dissecting room will be open, under the direction of the Professor of Anatomy and the Demonstrator.

Fees.—Matriculation, which is paid only once, \$5. Each Professor \$15. Graduation, \$50.

The number of Students during the last Session was 501; and of Graduates 227.

R. M. HUSTON, M.D.
Dean of the Faculty. No. 1 Girard st.
Philadelphia, July, 1851.

July 8-1818

ALBANY MEDICAL COLLEGE.—The next annual Course of Lectures will commence on the first Tuesday in October, and will continue sixteen weeks.

ALDEN MARSH, M.D., Professor of Surgery.

T. ROMEY BECK, M.D., Prof. of Materie Medicinae.

JAMES MCNAUGHTON, M.D., Prof. of Theory and Practice of Medicine.

LAWRENCE C. BECK, M.D., Prof. of Chemistry.

EDWARD EMMONS, M.D., Prof. of Obstetrics and Natural History.

JAMES H. ARMSTRONG, M.D., Prof. of Anatomy.

THOMAS HUN, M.D., Prof. of Institutes of Medicine.

AMOS DEAN, Esq., Prof. of Medical Jurisprudence.

The fees for a full Course of Lectures are \$70. The Matriculation fee is \$5. Graduation fee, \$50.

Those who wish for further information, or for circulars, will address a letter (post-paid) to

THOMAS HUN, Registrar.

July 30-1818.

COPARTNERSHIP NOTICE.—The Copartnership heretofore existing between the subscribers under the style and name of *Philbrick & Trafton*, is this day dissolved by mutual consent.

The business of the late firm will be settled by

S. B. PHILBRICK, at 160 Washington street.

June 12, 1851.

**S. B. PHILBRICK,
C. T. TRAFTON.**

The undersigned have this day formed a Copartnership, under the firm of *Philbrick, Carpenter & Co.*, and will continue the Drug Business (heretofore conducted by *Philbrick & Trafton*) at 160 Washington street, Boston.

**SAM'L. R. PHILBRICK,
BENJONI CARPENTER,
LUTHER ATWOOD.**

June 12, 1851.

June 18-1818.

D. H. HEATON'S HERNIA INFIRMARY.—Dr. H. having returned from Europe, will receive patients as formerly. He continues to attend particularly to the nature and speedy cure of Hernia, or Rupture, Varicose, Sclerotocel, Hydrocele, &c., also to diseases of females. Trusses are dispensed with in all cases.

Applications must be made at his office and residence, 2 Exeter Place, Boston.

July 24.

KOUBSO—Received by PHILBRICK, CARPENTER & CO.

July, 1851.

MEDICAL INSTITUTION OF YALE COLLEGE.—The Course of Lectures commences annually on the last Thursday of September, and continues sixteen weeks.

Benjamin Silliman, M.D., LL.D., on Chemistry and Pharmacy.

Ed. Ives, M.D., on the Theory and Practice of Physic.

Jonathan Knight, M.D., on the Principles and Practice of Surgery.

Timothy P. Bates, M.D., on Obstetrics.

Charles Hooker, M.D., on Anatomy and Physiology.

Henry Bronson, M.D., on Materie Medicinae and Therapeutics.

Lecture fees \$20.50. Matriculation, \$5. Graduation, \$15. **CHARLES HOOKER,** **Dean of the Faculty.**

New Haven, July, 1851.

By S. IL.

SMITH & MELVIN'S LIQUID EXTRACT OF OPIUM.—Containing all the desirable alkaloids of Opium, in a natural state of combination, purified and rendered permanent.—The want of a uniform preparation of Opium which should take the place of Laudanum, as usually prepared, has been long felt by physicians and others. Having been daily reminded, in dispensing medicines, of the uncertain strength, as well as objectionable qualities, of several preparations of this important drug, the subscribers were led to substitute for these a refined chemical solution, prepared by them, of the active medicinal constituents of Opium, respecting the Narcotic and other active compounds.

This Fluid Extract is a solution of the Salts of Morphine, Codeine, Thebaine, Narcine and Nicotine, with Nicotinic and Malic Acids, in the same proportions as they naturally exist in the best Opium. They are extracted without change of composition, or addition, and rendered permanent in this form. Narcotine, and other exciting and deleterious compounds existing in the Opium, are completely removed. While, therefore, it possesses the valuable properties of the Salts of Morphine, it has the intrinsic properties of the Salts of Nicotine, the undiluted drug, or exhibition in cases not under the control of Morphine Salts.

Its strength is precisely that of the original officinal Laudanum, and this standard, accurately fixed, will be maintained in all the parcels bearing our signature. The purchasers will therefore obtain the native Morphine Salts at a lower price than that of the artificial, and will enjoy a less repulsive remedy than Laudanum, with entire freedom from the disarrangement which artificial Morphine Salts often produce. Its specific action on the system is the same as that of the English Black Drop, while the deliriant and relaxing effects of that preparation are not produced by its continued use.

SMITH & MELVIN, Apothecaries,
32 Washington street, Boston.

Certificate from Dr. A. A. Hager.—“I have been requested by Messrs. Smith & Melvin, to analyse their preparation of the Salts of the Alkaloids in Opium, called *Liquid Extract of Opium*, and to examine their processes for preparing it.

This new medicinal preparation is the result of a beautiful pharmaceutical method, exhibiting both chemical and professional knowledge, applied with great skill and care. As stated by them, I find the *Liquid Extract* to be divested of Narcotine, and those substances deemed poisonous, certainly highly repulsive—while the natural Salts existing in Opium are retained in a nearly pure state.

I can most confidently recommend this as the best of the known compounds of the Opium Alkaloids, and the only one in which they are unaltered and rendered permanent.

Respectfully, **A. A. HAYER, State Assessor.**
1 Pine Street, Boston, 1st May, 1850.”

DISEASES OF THE EYE AND EAR.—Dr. J. H. DIX will, from this date, relinquish general practice and attend exclusively to the medical and surgical treatment of Diseases of the Eye and Ear. Tremont street, opposite Tremont House.

February 14, 1851.

Dr. HENRY W. WILLIAMS has removed to No. 10 Essex Street, where he will continue to give particular attention to Diseases of the Eye.

June 18-epid.

PHYSICIANS' OFFICE WARE AND UTENSILS.—Mortars of wedged iron, glass and porcelain; Pill Tiles, Pill Machines, Sputulas, Funnels, Scales and Weights, Graduated Measures, &c., for sale by *PHILBRICK & TRAFTON*.

Nov. 13.

MEDICAL JOURNAL ADVERTISING SHEET.

PURE MEDICINAL EXTRACTS.—We would call the attention of Physicians, Apothecaries and Druggists, to our list of Pure Extracts and annexed testimonials. **TILDEN & CO.**

Impassioned Alcoholic and Hypnotic Medicinal Extracts.—Aloe, Butterwort, Belladonna, Bitter Root, Bouncing Bet, Butter Root, Blue Flag, Boxwood, Camomile, Cohosh—black or blue, Cloves, Cow-parsnip, Dandelion, Digitalis, Dulcamara, Dock—yellow, Garget—or Puke, Gentian, Hyoscyamus, Harehock, Hops, Heliotrope—olive or white, Horehound, Indian Hemp, Lettuce—garden and wild, Lobelia, Mandrake, Malefern, Mullen, Oak—white, black or red; Poppy, Princess Pine, Rue, Savin, Sarsaparilla—American, Rio Negro, or Common; Thorough-pink, Wormwood; and other varieties frequently used, as soon as they can be obtained. They are put up in 1 lb., 1-1/2 lb., 1-1/4 lb., 2 oz. and 1 oz. glass jars.

Extract from a letter of Professor Clark, of the College of Physicians and Surgeons of New York, to the editor of the New York Journal of Medicine.
"I have later visited the manufacturers of these Extracts. After inspecting the whole process, and examining a large number of preparations, I became so fully persuaded that these gentlemen have taken upon the best plan of concentrating and preserving the active principles, especially of the narcotic vegetables, that I have voluntarily offered to them any assistance that I can render in introducing their medicines to the notice of the profession; being persuaded that these Extracts must possess the efficacy and the uniformity of strength so necessary to the success of any class of remedies and, I may add, no longer sought for in vain. Should your extraction of the value of these preparations correspond with my own, after you have examined them and tried them in practice, perhaps you may think it due alike to the profession and to the gentlemen who are improving the instruments by which we work, to call the attention of your readers to the improvements which I cannot doubt this process secures."

"Medical Society of the State of New York.
"Resolved, That this Society having considered examined, and approved of those having used the various Medicinal Extracts made by Messrs. Tilden & Co., of New Lebanon, New York, and being satisfied of the valuable character of these preparations, hereby recommend them to the members of the profession generally.
P. VAN BUREN, Secretary.

"Albany, Feb. 6, 1830."
"Massachusetts Medical Society for Berkshire District, June 21, 1830.

"Resolved, That this Society, having seen from various sources entitled to respect and confidence, commendatory notices of the excellency and purity of the various Medicinal Extracts prepared by the Messrs. Tilden, of New Lebanon, New York, and having tested them and used them ourselves, do most cordially recommend them to the medical profession.
H. H. CHILDS, President pro tem.,
and President of the Berkshire Med. College." Jan. 22.

IMPROVED UTERO-ABDOMINAL SUPPORTERS.—The subscriber would inform medical gentlemen that he continues to manufacture his improved "CHAPIN's Abdominal Supporters," and they can be furnished with this instrument, which has been found so useful in cases of proliditis and prolapsus uteri, abdominal and dorsal weaknesses, as well as in cases of prolapsus ani, &c., viz. from \$2.00 to \$10.00, according to quality. Perineum strap, necessary in some cases extra, at 50 cents to 75 cents. The measure of the patients to be taken around the pelvis in inches.

Reference may be had to the following physicians in Boston, among others, who have had practical knowledge of its utility:—Drs. John C. Warren, W. Channing, Geo. Hayward, J. Ware, E. Reynolds, Jr. J. Jeffries, J. V. C. Smith, W. Lewis, Jr., J. Homans, J. Mason Warren, &c.

The Supporter, with printed instructions for applying the same, will be furnished and exchanged until suitably fitted, by application personally, by letter, (post-paid) to

No. 221 Washington St., Boston,
op. Med. Jour. office.)

The above may also be obtained of Messrs. James Green & Co., Worcester; G. H. Carleton and James C. Ayer, Lowell; William P. S. Caldwell, New Bedford; Bagg & Co., Cabotville, in Maine; Joshua Durbin & Co., Portland; G. W. Ladd, Augusta; Aaron Young & Co., Bangor; Eben Fuller, Augusta; Wm. Dyer, Waterville; J. Balch, &c., Providence, R. I. Andrew Truxas, Schenectady, N. Y.

Jan. 1-1am

CITY OF BOSTON.—City Physician's Office and Vaccine Institution, No. 21 Court Square.
"Hour for Vaccination, from Twelve to One o'clock, daily.
HENRY G. CLARK,
Residence 95 Salem Street. City Physician.
March 12—eoptf

DISEASES OF THE THROAT AND LUNGS.
INHALATION, &c.—The Subscriber continues to treat these diseases by *inhalation* of the powder of the *Nitrate, Lycopodium, &c.*, also with the *Lavender Shower Sprayer* and *Prohong*.

Inhalers, with the *Powder*, will be sent, by Express or otherwise, as ordered, to any part of the country, to physicians or patients. I have found this powder highly serviceable in ulcerated sore throat, bronchitis, laryngitis and incipient phthisis, and the testimony of several physicians who have tried it in various places has been greatly in favor of its use.
W. M. CORNELL, M.D.,
Oct. 22—eoptf 495 Washington St., Boston.

PALMER'S PATENT LEGS. Manufactured at Springfield, Mass., *Burt's Block, Main Street*, by PALMER & CO.—Extract of Report of Massachusetts Charitable Mechanic Association, Sept. 1858, Henry J. Bigelow, Prof. of Surgery Massachusetts Medical College, Chairman of Judges on Surgical Instruments, to wit:—"The simplicity of their mechanism, the relative distribution of the various cords, and the *beauty* and *certainty* with which they act, are points of considerable resemblance to the *structure* and *functions* of the healthy limb. This limb has ameliorated the condition of a numberless class of the community, and is far better than previous apparatus of the *sort*." "The undersigned, having witnessed the successful use of the artificial limbs of Messrs. Palmer & Co., very gladly recommend them with confidence to those who have suffered the loss of a lower extremity."

JOHN C. WARREN, B. D. TOWNSEND,
GEORGE HAYWARD, J. MARON WARREN,
JACOB BIGELOW, D. HUMPHREYS STOREY,
Surgeons and Physicians of the
Massachusetts General Hospital.

These limbs have received twenty awards from the most distinguished institutes in this country. A model limb, and those in use, may be seen, and information obtained, by calling on our Agent, Dr. J. Cheever, No. 1 Tremont Temple, Boston.
March 19—6m PALMER & CO.

FRESH AND GENUINE DRUGS AND MEDICINES of a superior quality, carefully prepared for physicians' use, and for sale on the most favorable terms, at 33 Tremont Row, Boston, by

JOSEPH BURNETT,
(Successor to T. Metcalf.)

Feb. 10—1f

MANGANESE.—Sulphate, Carbonate, Chloride Iodide, Tartrate, Malate, Acetate and Tannate Syrup Iodide Manganese.

Manufactured and sold by PHILBRICK & TRAPTON.

Manganese and its preparations have been used in France with great advantage in cases of Cholera, Phthisis, Scrofula, Scirrhous, Constitutional Syphilis, &c. &c. Observations and results may be found in Brithwaite's Retrospect, No. XX. O16

NEW PREPARATIONS.—Tannate of Quinine, Chloride of Sulphur, Chloride of Arsenic, manufactured and sold by

Oct. 16. PHILBRICK & TRAPTON.

IMPROVED ARTIFICIAL LEGS.—Price, below the Knee, \$45.00; above the Knee, \$65.00. Also, artificial *Hands* and *Arms*, from \$25.00 to \$70.00 (all limbs *handed*). These limbs are made useful to work at any employment, with our Improved Spring Instruments, which are attached or detached to and from the arm in one moment.

"On the receipt of accurate measurement, a limb will be sent to any part of the Union or Canada, (a model fit will be sent in all cases)."

(Established 1839.) JAMES MILLER & CO.
Many years with Sheldrake, Bigg & Co., London, Surgical and Anatomical Mechanicians, 3-2 Bromfield street, (up stairs) Boston.

References.—Drs. J. C. Warren, M. S. Perry, J. Mason Warren, S. D. Townsend, D. H. Storey, and J. V. C. Smith, Editor of the Boston Medical and Surgical Journal.

Jan. 1—eoptf

FOR SALE.—The ride of a practising physician, to worth \$1000 a year. The incumbent wishes to sell Horse, Buggy, office fixtures, &c. Payment given immediately. For further particulars, address J. M. SMITH, M.D., Ludlow, Mass. Aug. 20—4t

MEDICAL JOURNAL ADVERTISING SHEET.

BOYLSTON MEDICAL PRIZE QUESTIONS.—

The Boylston Medical Committee, appointed by the Corporation of Harvard University, consists of the following Physicians:—

JOHN C. WARREN, M.D. WALTER CHANNING, M.D.
R. D. TOWNSEND, M.D. D. H. STORER, M.D.
G. C. SHATTUCK, M.D. EDW. REYNOLDS, M.D.
J. B. S. JACKSON, M.D. J. MAPON WARREN, M.D.
and JOHN JEFFRIES, M.D., Secy.

At the Annual Meeting of the Committee, held Aug. 6, 1831, a Dissertation had been offered on either of the subjects proposed for the year 1831. The subjects for 1832 are—

1. On the Diseases of the Prostate Gland.
2. Original Researches with the Microscope, Illustrative of Anatomy, Physiology, or Pathology.

Dissertations on these subjects must be transmitted, post paid, to JOHN C. WARREN, M.D., Boston, on or before the first Wednesday of April, 1832.

The subjects for 1833 are—

1. On Paracentesis, Pleurisy and other diseases followed by Effusion into the cavity of the Thorax.
2. On the Use of Cow Liver Oil in Phthisis, and other Diseases of Nutrition.

Dissertations on these subjects must be transmitted, as above, on or before the first Wednesday in April, 1833.

The author of the best Dissertation considered worthy of a prize on either of the above questions, will be entitled to a premium of sixty dollars, or a gold medal of that value, at his option.

Each Dissertation must be accompanied by a sealed packet on which shall be written some device, or sentence, which shall be enclosed the author's name and residence. The same device or sentence is to be written on the Dissertation to which the packet is attached.

All unsuccessful Dissertations are deposited with the Secretary, from whom they may be obtained, with the sealed packet unopened, if called for within one year after they have been received.

By an order adopted in 1825 the Secretary was directed to publish annually the following votes, viz.:

1. That the Board do not consider themmen as appropriate the subjects contained in any of the Dissertations, which the Committee may be adjudged.
2. That in case of the publication of a successful Dissertation, the author be considered as bound to print the above vote in connection therewith.

83-64

JOHN JEFFRIES, Secretary.

TO BE SOLD. The celebrated Collection of Physiological and Pathological Preparations in Wax of the late Signor SARTI, now on exhibition at the Society Library Rooms, No. 463 Broadway, New York city, will be sold at Public Auction, at the above rooms, on MONDAY, Sept. 13, 1831. For terms of sale, apply in person, or by letter, post paid, to MOSES B. MACAY, Attor. and Coun., at Law, 53-21 No. 9 Nassau St., New York.

GERMAN SALACINE—For sale at 150 Washington st., by PHILBRICK & TRAFTON Oct. 12

GUTTA PERCHA WATER PIPE—*for Pumps, for Aqueducts, Hydraulic Rams, &c.* This pipe has been in use for several years, and has proved superior to any other material for the above purposes. The many cases of chronic disease and even death caused by the poisonous properties of lead pipe, have caused great inquiry for some substitute for that metal. This Gutta Percha Pipe seems to fulfil perfectly all the conditions required. The medical profession are respectfully requested to investigate the subject, and to examine the pipe.

For sale at wholesale and retail, by CHARLES STODDER, 73 KILBRETT STREET. For references, see advertisement in the *Pathfinder*. June 11—3m.

HERRING'S CROTON OIL—*for sale by PHILBRICK & TRAFTON.* Nov. 6.

PURE COD LIVER OIL—*Sold by PHILBRICK & TRAFTON, Chemists and Physicians' Drugists, 150 Washington street, Boston.* Oct. 16.

SUPERIOR GUMS, RESINS, &c.—*Socotrine Aloes, Amomum, Guaiac, Myrrh, True Burmese Pitch, sold by PHILBRICK & TRAFTON.* Nov. 6.

PURE CHLOROFORM—*For sale by JOSEPH BURNETT, Apothecary, No. 33 Tremont Row.* Jan. 5—1f

ECLECTIC MEDICAL INSTITUTE OF CINCINNATI

Chartered in 1831. Total number of Matriculants from 1831 to 1831, 1834.

FACULTY.

The seventh Winter Session of this College will commence on the first Monday of November, 1831, and continue four months. The chairs of the Faculty will be arranged as follows:

1. G. JONES, M.D., Prof. of Theory and Practice of Medicine.
2. J. C. WATSON, M.D., Prof. of Surgery.

3. L. HILL, M.D., Prof. of Obstetrics and Diseases of Women and Children.

4. F. FREEMAN, M.D., Prof. of Special, Surgical and Pathological Anatomy.

5. R. BUCHANAN, M.D., Prof. of Physiology and Institutes of Medicine.

6. E. JONES, M.D., Prof. of Materia Medica, Therapeutics and Medical Botany.

7. J. MILTON SANDERS, M.D. LL.D., Prof. of Chemistry, Pharmacy and Toxicology.

8. F. E. NEWTON, M.D., Demonstrator of Anatomy and Surgical Practice.

A gratuitous preliminary course of Lectures will commence on the second Monday of October. At the same time the Demonstrator's rooms will be opened, with every facility for the study of Anatomy. Anatomical material is abundant and cheap. Prompt attendance at the opening of the session is expected.

TERMS.—Tickets to a full course of lectures (until graduation) \$100 in advance, or a well-endorsed note for \$125. To a single course of lectures \$20 in advance, or a well-endorsed note for \$25. Matriculation, \$5. Graduation, \$5. Demonstrator's ticket, \$5. Board costs from \$2 to \$3.50 per week. Students sometimes board themselves for much less. Students, upon their arrival in the city, will call at the office of Prof. R. S. Newton, on Seventh street, between Vine and Race. For further particulars, address Dr. R. S. Newton, or

JOS. R. BUCHANAN, M.D., Dean.

Cincinnati, Ohio, Aug. 1831. 83-3t

A PHYSICIAN, located about 7 miles from Boston, in a flourishing village, and within a few miles of a grand and well-constructed residence to any well-qualified practitioner, upon his purchase of real estate at his true value, or less. This offers a good opportunity for any gentleman who wishes a fine residence near Boston, to introduce a son or friend to an ample practice. Inquire at this office.

Aug. 29—81*

TANNIC ACID—American, English and German Tannic Acid of superior quality, for sale by PHILBRICK & TRAFTON, Chemists, and Physicians' Drugists, Oct. 16. 150 Washington st.

ARTIFICIAL EYES AND ANATOMICAL PREPARATIONS imported and sold by Nov. 4. PHILBRICK & TRAFTON, Physicians' Drugists.

TINCTURES from English leaves of Honeysuckle, Cowslip, Digitalis, Belladonna, and Aconite, Tinct. Indian Hemp. These Tinctures are of official strength. Sold by PHILBRICK & TRAFTON. Nov. 6.

VERATRUM, Aconitine, Salts of Morphin, and other Chemicals, from the celebrated chemist, Morson, sold by PHILBRICK & TRAFTON. Nov. 13.

MICROSCOPES—Joseph Burnett, No. 33 Tremont Row (Agent for the sale of Spencer's Microscopes), has just received two instruments from this celebrated maker, which he offers for sale. Also, a full assortment of Alexander Heth's Preparations of Microscopic Anatomy.

Je25—11.

THE Boston Medical and Surgical Journal

IS PUBLISHED EVERY WEDNESDAY,
At 150 Washington St., corner of Franklin St.
J. V. C. SMITH, M.D., EDITOR.
DAVID CLAPP, PUBLISHER.

Price—Three dollars a year, in advance; after three months, \$3.50; if not paid within the year, \$4. For a single copy, 8 cents.